



HEALTH ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2022
OF THE CONDITION AND AFFAIRS OF THE

UnitedHealthcare Community Plan, Inc.

NAIC Group Code 0707 0707 NAIC Company Code 95467 Employer's ID Number 38-3204052
(Current) (Prior)

Organized under the Laws of Michigan, State of Domicile or Port of Entry MI

Country of Domicile United States of America

Licensed as business type: Health Maintenance Organization

Is HMO Federally Qualified? Yes [] No [X]

Incorporated/Organized 10/11/1994 Commenced Business 10/11/1994

Statutory Home Office 3000 Town Center Drive, Suite 1400 Southfield, MI, US 48075
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 3000 Town Center Drive, Suite 1400
(Street and Number)
Southfield, MI, US 48075 248-331-4389
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 9800 Health Care Lane, MN017-W500 Minnetonka, MN, US 55343
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 3000 Town Center Drive, Suite 1400
(Street and Number)
Southfield, MI, US 48075 248-331-4389
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.uhccommunityplan.com

Statutory Statement Contact Heather Lyn Meester 952-979-6138
(Name) (Area Code) (Telephone Number)
heather_meester@uhc.com 952-931-4651
(E-mail Address) (FAX Number)

OFFICERS

President Dennis James Mouras Chief Financial Officer Carol Ann Gothard
Treasurer Peter Marshall Gill Secretary Nicholas Robert Shjerve #

OTHER

Nyle Brent Cottingham, Vice President Heather Anastasia Lang, Assistant Secretary

DIRECTORS OR TRUSTEES

Wendy Margaret Abbott Trina Michelle Burnett Michelle Leib Crakes
Tracy Lynn Davidson Debra Joanne Sather

State of Michigan State of Michigan State of Minnesota
County of Oakland County of Oakland County of Hennepin

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Dennis J. Mouras
Dennis James Mouras
President

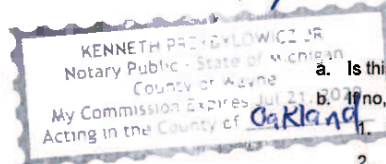
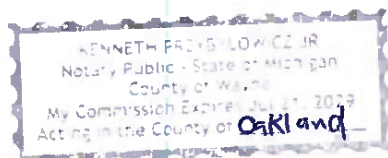
Carol Ann Gothard
Carol Ann Gothard
Chief Financial Officer

Peter Marshall Gill
Peter Marshall Gill
Treasurer

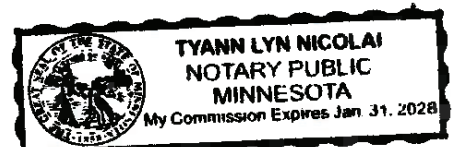
Subscribed and sworn to before me this
2 day of February 2023
Ken P. Pappas

Subscribed and sworn to before me this
2 day of February 2023
Ken P. Pappas

Subscribed and sworn to before me this
26 day of January 2023
Tyann Nicolai



- a. Is this an original filing?..... Yes [X] No []
- b. State the amendment number.....
2. Date filed.....
3. Number of pages attached.....



ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D)	80,492,694	0	80,492,694	78,064,893
2. Stocks (Schedule D):				
2.1 Preferred stocks	0	0	0	0
2.2 Common stocks	0	0	0	0
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens	0	0	0	0
3.2 Other than first liens.....	0	0	0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$0 encumbrances)	0	0	0	0
4.2 Properties held for the production of income (less \$0 encumbrances)	0	0	0	0
4.3 Properties held for sale (less \$0 encumbrances)	0	0	0	0
5. Cash (\$7,423,274 , Schedule E - Part 1), cash equivalents (\$146,777,576 , Schedule E - Part 2) and short-term investments (\$66,999,598 , Schedule DA)	221,200,448	0	221,200,448	256,963,915
6. Contract loans, (including \$0 premium notes)	0	0	0	0
7. Derivatives (Schedule DB)	0	0	0	0
8. Other invested assets (Schedule BA)	8,987,012	0	8,987,012	10,408,592
9. Receivables for securities	904	0	904	182
10. Securities lending reinvested collateral assets (Schedule DL)	0	0	0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	310,681,058	0	310,681,058	345,437,582
13. Title plants less \$0 charged off (for Title insurers only)	0	0	0	0
14. Investment income due and accrued	1,376,514	0	1,376,514	731,802
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	25,479,864	75,154	25,404,710	20,206,689
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$0 earned but unbilled premiums)	0	0	0	0
15.3 Accrued retrospective premiums (\$0) and contracts subject to redetermination (\$27,139,236)	26,990,410	0	26,990,410	16,374,485
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	0	0	0	0
16.2 Funds held by or deposited with reinsured companies	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts	0	0	0	0
17. Amounts receivable relating to uninsured plans	110,972	2,347	108,625	78,139
18.1 Current federal and foreign income tax recoverable and interest thereon	0	0	0	0
18.2 Net deferred tax asset	1,282,244	0	1,282,244	1,432,793
19. Guaranty funds receivable or on deposit	0	0	0	0
20. Electronic data processing equipment and software	0	0	0	0
21. Furniture and equipment, including health care delivery assets (\$0)	0	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates	0	0	0	0
24. Health care (\$22,391,109) and other amounts receivable	25,736,547	3,345,438	22,391,109	15,988,352
25. Aggregate write-ins for other than invested assets	297	297	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	391,657,906	3,423,236	388,234,670	400,249,842
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28. Total (Lines 26 and 27)	391,657,906	3,423,236	388,234,670	400,249,842
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Prepaid Commissions	231	231	0	0
2502. Miscellaneous Receivables	66	66	0	0
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	297	297	0	0

LIABILITIES, CAPITAL AND SURPLUS

	Current Year			Prior Year
	1	2	3	4
	Covered	Uncovered	Total	Total
1. Claims unpaid (less \$4,252,059 reinsurance ceded)	111,050,676	50,811	111,101,487	76,060,854
2. Accrued medical incentive pool and bonus amounts	7,357,458	0	7,357,458	6,277,390
3. Unpaid claims adjustment expenses.....	1,152,367	0	1,152,367	793,706
4. Aggregate health policy reserves, including the liability of \$5,667,669 for medical loss ratio rebate per the Public Health Service Act	37,942,683	0	37,942,683	132,031,250
5. Aggregate life policy reserves.....	0	0	0	0
6. Property/casualty unearned premium reserves.....	0	0	0	0
7. Aggregate health claim reserves.....	1,378,918	444	1,379,362	1,192,741
8. Premiums received in advance.....	6,221,502	0	6,221,502	6,259,281
9. General expenses due or accrued.....	21,190,290	0	21,190,290	25,726,861
10.1 Current federal and foreign income tax payable and interest thereon (including \$0 on realized capital gains (losses)) ..	2,970,188	0	2,970,188	5,623,595
10.2 Net deferred tax liability.....	0	0	0	0
11. Ceded reinsurance premiums payable.....	0	0	0	0
12. Amounts withheld or retained for the account of others.....	0	0	0	0
13. Remittances and items not allocated.....	1,821	0	1,821	202,221
14. Borrowed money (including \$0 current) and interest thereon \$0 (including \$0 current).....	0	0	0	0
15. Amounts due to parent, subsidiaries and affiliates.....	3,954,810	0	3,954,810	2,887,883
16. Derivatives.....	0	0	0	0
17. Payable for securities.....	0	0	0	0
18. Payable for securities lending	0	0	0	0
19. Funds held under reinsurance treaties (with \$0 authorized reinsurers, \$0 unauthorized reinsurers and \$0 certified reinsurers).....	0	0	0	0
20. Reinsurance in unauthorized and certified (\$0) companies	0	0	0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates	0	0	0	0
22. Liability for amounts held under uninsured plans.....	7,994,560	0	7,994,560	6,304,174
23. Aggregate write-ins for other liabilities (including \$127,865 current).....	127,865	0	127,865	74,355
24. Total liabilities (Lines 1 to 23).....	201,343,138	51,255	201,394,393	263,434,311
25. Aggregate write-ins for special surplus funds.....	XXX	XXX	0	0
26. Common capital stock.....	XXX	XXX	0	0
27. Preferred capital stock.....	XXX	XXX	0	0
28. Gross paid in and contributed surplus.....	XXX	XXX	56,003,392	56,003,392
29. Surplus notes.....	XXX	XXX	0	0
30. Aggregate write-ins for other than special surplus funds.....	XXX	XXX	0	0
31. Unassigned funds (surplus).....	XXX	XXX	130,836,885	80,812,139
32. Less treasury stock, at cost: 32.1 .....0 shares common (value included in Line 26 \$0).....	XXX	XXX	0	0
32.2 .....0 shares preferred (value included in Line 27 \$0).....	XXX	XXX	0	0
33. Total capital and surplus (Lines 25 to 31 minus Line 32).....	XXX	XXX	186,840,277	136,815,531
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	388,234,670	400,249,842
DETAILS OF WRITE-INS				
2301. Unclaimed Property	127,865	0	127,865	74,355
2302.				
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 thru 2303 plus 2398)(Line 23 above)	127,865	0	127,865	74,355
2501.	XXX	XXX		
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	XXX	XXX	0	0
3001.	XXX	XXX		
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 thru 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
1. Member Months.....	XXX.....	3,881,402	3,647,507
2. Net premium income (including \$0 non-health premium income)	XXX.....	1,380,864,406	1,306,091,995
3. Change in unearned premium reserves and reserve for rate credits	XXX.....	104,202,388	(69,162,957)
4. Fee-for-service (net of \$0 medical expenses)	XXX.....	0	0
5. Risk revenue	XXX.....	0	0
6. Aggregate write-ins for other health care related revenues	XXX.....	0	0
7. Aggregate write-ins for other non-health revenues	XXX.....	0	0
8. Total revenues (Lines 2 to 7)	XXX.....	1,485,066,794	1,236,929,038
Hospital and Medical:			
9. Hospital/medical benefits	241,432	819,445,331	664,723,517
10. Other professional services	2,481	17,135,638	12,265,289
11. Outside referrals	0	0	0
12. Emergency room and out-of-area	14,596	75,434,052	57,540,357
13. Prescription drugs	42,882	291,707,917	241,569,248
14. Aggregate write-ins for other hospital and medical.....	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts	0	17,736,966	4,591,626
16. Subtotal (Lines 9 to 15)	301,391	1,221,459,904	980,690,037
Less:			
17. Net reinsurance recoveries	0	7,307,260	3,912,574
18. Total hospital and medical (Lines 16 minus 17)	301,391	1,214,152,644	976,777,463
19. Non-health claims (net)	0	0	0
20. Claims adjustment expenses, including \$45,220,406 cost containment expenses	0	56,892,277	89,736,556
21. General administrative expenses	0	157,608,427	108,823,511
22. Increase in reserves for life and accident and health contracts (including \$0 increase in reserves for life only)	0	0	0
23. Total underwriting deductions (Lines 18 through 22).....	301,391	1,428,653,348	1,175,337,530
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX.....	56,413,446	61,591,508
25. Net investment income earned (Exhibit of Net Investment Income, Line 17)	0	4,350,480	361,906
26. Net realized capital gains (losses) less capital gains tax of \$(206,982)	0	(778,645)	231,294
27. Net investment gains (losses) (Lines 25 plus 26)	0	3,571,835	593,200
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$17,392) (amount charged off \$(9,775))]	0	7,617	(13,349)
29. Aggregate write-ins for other income or expenses	0	0	0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX.....	59,992,898	62,171,359
31. Federal and foreign income taxes incurred	XXX.....	11,410,476	11,667,161
32. Net income (loss) (Lines 30 minus 31)	XXX	48,582,422	50,504,198
DETAILS OF WRITE-INS			
0601.	XXX.....		
0602.	XXX.....		
0603.	XXX.....		
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX.....	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698)(Line 6 above)	XXX	0	0
0701.	XXX.....		
0702.	XXX.....		
0703.	XXX.....		
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX.....	0	0
0799. Totals (Lines 0701 thru 0703 plus 0798)(Line 7 above)	XXX	0	0
1401.			
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above)	0	0	0
2901.			
2902.			
2903.			
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above)	0	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year	2 Prior Year
CAPITAL AND SURPLUS ACCOUNT		
33. Capital and surplus prior reporting year.....	136,815,531	152,527,398
34. Net income or (loss) from Line 32	48,582,422	50,504,198
35. Change in valuation basis of aggregate policy and claim reserves	0	0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$0	0	0
37. Change in net unrealized foreign exchange capital gain or (loss)	0	0
38. Change in net deferred income tax	(150,549)	636,320
39. Change in nonadmitted assets	1,592,873	(1,852,385)
40. Change in unauthorized and certified reinsurance	0	0
41. Change in treasury stock	0	0
42. Change in surplus notes	0	0
43. Cumulative effect of changes in accounting principles.....	0	0
44. Capital Changes:		
44.1 Paid in	0	0
44.2 Transferred from surplus (Stock Dividend).....	0	0
44.3 Transferred to surplus.....	0	0
45. Surplus adjustments:		
45.1 Paid in	0	0
45.2 Transferred to capital (Stock Dividend)	0	0
45.3 Transferred from capital	0	0
46. Dividends to stockholders	0	(65,000,000)
47. Aggregate write-ins for gains or (losses) in surplus	0	0
48. Net change in capital and surplus (Lines 34 to 47)	50,024,746	(15,711,867)
49. Capital and surplus end of reporting period (Line 33 plus 48)	186,840,277	136,815,531
DETAILS OF WRITE-INS		
4701.		
4702.		
4703.		
4798. Summary of remaining write-ins for Line 47 from overflow page	0	0
4799. Totals (Lines 4701 thru 4703 plus 4798)(Line 47 above)	0	0

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	1,375,067,898	1,298,433,971
2. Net investment income	5,339,179	1,983,307
3. Miscellaneous income	0	0
4. Total (Lines 1 through 3)	1,380,407,077	1,300,417,278
5. Benefit and loss related payments	1,182,644,291	988,855,942
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	216,961,923	193,297,830
8. Dividends paid to policyholders	0	0
9. Federal and foreign income taxes paid (recovered) net of \$0 tax on capital gains (losses)	13,856,902	2,437,565
10. Total (Lines 5 through 9)	1,413,463,116	1,184,591,337
11. Net cash from operations (Line 4 minus Line 10)	(33,056,039)	115,825,941
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	33,264,734	23,841,302
12.2 Stocks	0	0
12.3 Mortgage loans	0	0
12.4 Real estate	0	0
12.5 Other invested assets	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	(1,805)	(3,892)
12.7 Miscellaneous proceeds	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	33,262,929	23,837,410
13. Cost of investments acquired (long-term only):		
13.1 Bonds	36,889,675	22,755,948
13.2 Stocks	0	0
13.3 Mortgage loans	0	0
13.4 Real estate	0	0
13.5 Other invested assets	0	492,657
13.6 Miscellaneous applications	722	182
13.7 Total investments acquired (Lines 13.1 to 13.6)	36,890,397	23,248,787
14. Net increase (decrease) in contract loans and premium notes	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(3,627,468)	588,623
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes	0	0
16.2 Capital and paid in surplus, less treasury stock	0	0
16.3 Borrowed funds	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0
16.5 Dividends to stockholders	0	65,000,000
16.6 Other cash provided (applied)	920,040	1,017,555
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	920,040	(63,982,445)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(35,763,467)	52,432,119
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	256,963,915	204,531,796
19.2 End of year (Line 18 plus Line 19.1)	221,200,448	256,963,915

Note: Supplemental disclosures of cash flow information for non-cash transactions:

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ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

2

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS

	1	2	3	4
Line of Business	Direct Business	Reinsurance Assumed	Reinsurance Ceded	Net Premium Income (Cols. 1 + 2 - 3)
1. Comprehensive (hospital and medical) individual	7,548,133	0	0	7,548,133
2. Comprehensive (hospital and medical) group	7,823,652	0	0	7,823,652
3. Medicare Supplement	0	0	0	0
4. Dental only	0	0	0	0
5. Vision only	0	0	0	0
6. Federal Employees Health Benefits Plan	0	0	0	0
7. Title XVIII - Medicare	304,017,884	0	0	304,017,884
8. Title XIX - Medicaid	1,071,433,724	0	9,958,987	1,061,474,737
9. Credit A&H	0	0	0	0
10. Disability Income	0	0	0	0
11. Long-Term Care	0	0	0	0
12. Other health	0	0	0	0
13. Health subtotal (Lines 1 through 12)	1,390,823,393	0	9,958,987	1,380,864,406
14. Life	0	0	0	0
15. Property/casualty	0	0	0	0
16. Totals (Lines 13 to 15)	1,390,823,393	0	9,958,987	1,380,864,406

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - CLAIMS INCURRED DURING THE YEAR

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1. Payments during the year:														
1.1 Direct	1,173,247,465	4,868,405	6,749,834	0	0	0	0	236,854,000	924,775,226	0	0	0	0	0
1.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1.3 Reinsurance ceded	7,260,073	0	0	0	0	0	0	0	7,260,073	0	0	0	0	0
1.4 Net	1,165,987,392	4,868,405	6,749,834	0	0	0	0	236,854,000	917,515,153	0	0	0	0	0
2. Paid medical incentive pools and bonuses	16,656,899	0	761	0	0	0	0	540,866	16,115,272	0	0	0	0	0
3. Claim liability December 31, current year from Part 2A:														
3.1 Direct	115,353,546	864,145	1,021,900	0	0	0	0	21,914,988	91,552,513	0	0	0	0	0
3.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded	4,252,059	0	0	0	0	0	0	0	4,252,059	0	0	0	0	0
3.4 Net	111,101,487	864,145	1,021,900	0	0	0	0	21,914,988	87,300,454	0	0	0	0	0
4. Claim reserve December 31, current year from Part 2D:														
4.1 Direct	1,379,362	18,318	0	0	0	0	0	39,467	1,321,577	0	0	0	0	0
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.4 Net	1,379,362	18,318	0	0	0	0	0	39,467	1,321,577	0	0	0	0	0
5. Accrued medical incentive pools and bonuses, current year	7,357,458	0	1,454	0	0	0	0	318,821	7,037,183	0	0	0	0	0
6. Net health care receivables (a)	4,798,970	203,357	134,862	0	0	0	0	7,610,754	(3,150,003)	0	0	0	0	0
7. Amounts recoverable from reinsurers December 31, current year	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Claim liability December 31, prior year from Part 2A:														
8.1 Direct	80,265,725	0	753,842	0	0	0	0	10,223,780	69,288,103	0	0	0	0	0
8.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8.3 Reinsurance ceded	4,204,871	0	0	0	0	0	0	0	4,204,871	0	0	0	0	0
8.4 Net	76,060,854	0	753,842	0	0	0	0	10,223,780	65,083,232	0	0	0	0	0
9. Claim reserve December 31, prior year from Part 2D:														
9.1 Direct	1,192,741	0	0	0	0	0	0	11,625	1,181,116	0	0	0	0	0
9.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9.4 Net	1,192,741	0	0	0	0	0	0	11,625	1,181,116	0	0	0	0	0
10. Accrued medical incentive pools and bonuses, prior year	6,277,391	0	977	0	0	0	0	164,151	6,112,263	0	0	0	0	0
11. Amounts recoverable from reinsurers December 31, prior year	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Incurred Benefits:														
12.1 Direct	1,203,722,937	5,547,511	6,883,030	0	0	0	0	240,962,296	950,330,100	0	0	0	0	0
12.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12.3 Reinsurance ceded	7,307,261	0	0	0	0	0	0	0	7,307,261	0	0	0	0	0
12.4 Net	1,196,415,676	5,547,511	6,883,030	0	0	0	0	240,962,296	943,022,839	0	0	0	0	0
13. Incurred medical incentive pools and bonuses	17,736,966	0	1,238	0	0	0	0	695,536	17,040,192	0	0	0	0	0

(a) Excludes \$0 loans or advances to providers not yet expensed.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1. Reported in Process of Adjustment:														
1.1 Direct	19,962,201	179,500	235,360	0	0	0	0	5,052,741	14,494,600	0	0	0	0	0
1.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1.4 Net	19,962,201	179,500	235,360	0	0	0	0	5,052,741	14,494,600	0	0	0	0	0
2. Incurred but Unreported:														
2.1 Direct	94,983,202	684,645	786,540	0	0	0	0	16,454,104	77,057,913	0	0	0	0	0
2.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded	4,252,059	0	0	0	0	0	0	0	4,252,059	0	0	0	0	0
2.4 Net	90,731,143	684,645	786,540	0	0	0	0	16,454,104	72,805,854	0	0	0	0	0
3. Amounts Withheld from Paid Claims and Capitations:														
3.1 Direct	408,143	0	0	0	0	0	0	408,143	0	0	0	0	0	0
3.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.4 Net	408,143	0	0	0	0	0	0	408,143	0	0	0	0	0	0
4. TOTALS:														
4.1 Direct	115,353,546	864,145	1,021,900	0	0	0	0	21,914,988	91,552,513	0	0	0	0	0
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	4,252,059	0	0	0	0	0	0	0	4,252,059	0	0	0	0	0
4.4 Net	111,101,487	864,145	1,021,900	0	0	0	0	21,914,988	87,300,454	0	0	0	0	0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2B - ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid During the Year		Claim Reserve and Claim Liability December 31 of Current Year		5	6
	1	2	3	4		
	On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid December 31 of Prior Year	On Claims Incurred During the Year	Claims Incurred In Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
1. Comprehensive (hospital and medical) individual	0	4,868,405	0	882,462	0	0
2. Comprehensive (hospital and medical) group	406,464	6,343,368	72,312	949,587	478,776	753,842
3. Medicare Supplement	0	0	0	0	0	0
4. Dental Only	0	0	0	0	0	0
5. Vision Only	0	0	0	0	0	0
6. Federal Employees Health Benefits Plan	0	0	0	0	0	0
7. Title XVIII - Medicare	3,877,973	232,976,028	64,388	21,890,068	3,942,361	10,235,406
8. Title XIX - Medicaid	65,104,539	852,410,617	6,672,176	81,949,857	71,776,715	66,264,348
9. Credit A&H	0	0	0	0	0	0
10. Disability Income	0	0	0	0	0	0
11. Long-Term Care	0	0	0	0	0	0
12. Other health	0	0	0	0	0	0
13. Health subtotal (Lines 1 to 12)	69,388,976	1,096,598,418	6,808,876	105,671,974	76,197,852	77,253,596
14. Health care receivables (a)	733,296	23,299,621	0	1,703,630	733,296	20,937,578
15. Other non-health	0	0	0	0	0	0
16. Medical incentive pools and bonus amounts	5,063,536	11,593,361	460,449	6,897,009	5,523,985	6,277,390
17. Totals (Lines 13 - 14 + 15 + 16)	73,719,216	1,084,892,158	7,269,325	110,865,353	80,988,541	62,593,408

(a) Excludes \$ 0 loans or advances to providers not yet expensed.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(\$000 Omitted)

Section A - Paid Health Claims - Comprehensive (Hospital & Medical)

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2018	2 2019	3 2020	4 2021	5 2022
1.	Prior	(170)	(132)	(134)	(135)	(135)
2.	2018	53	(24)	(24)	(24)	(25)
3.	2019	XXX	3, 156	3, 327	3, 331	3, 330
4.	2020	XXX	XXX	5, 857	6, 341	6, 349
5.	2021	XXX	XXX	XXX	6, 811	7, 213
6.	2022	XXX	XXX	XXX	XXX	11, 212

Section B - Incurred Health Claims - Comprehensive (Hospital & Medical)

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2018	2 2019	3 2020	4 2021	5 2022
1.	Prior	(165)	(132)	(134)	(135)	(135)
2.	2018	60	(23)	(24)	(24)	(25)
3.	2019	XXX	3, 544	3, 332	3, 331	3, 330
4.	2020	XXX	XXX	6, 653	6, 371	6, 349
5.	2021	XXX	XXX	XXX	7, 537	7, 286
6.	2022	XXX	XXX	XXX	XXX	13, 045

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Comprehensive (Hospital & Medical)

Years in which Premiums were Earned and Claims were Incurred		1	2	3	4	5	6	7	8	9	10
		Premiums Earned	Claims Payment	Claim Adjustment Expense Payments	(Col. 3/2) Percent	Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	(Col. 5/1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1.	2018	242	(25)	26	(102.3)	1	0.2	0	0	1	0.2
2.	2019	3, 926	3, 330	177	5.3	3, 507	89.3	0	0	3, 507	89.3
3.	2020	6, 789	6, 349	379	6.0	6, 728	99.1	0	0	6, 728	99.1
4.	2021	8, 785	7, 213	453	6.3	7, 666	87.3	73	0	7, 739	88.1
5.	2022	15, 375	11, 212	777	6.9	11, 989	78.0	1, 833	11	13, 833	90.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(\$000 Omitted)

Section A - Paid Health Claims - Title XVIII

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2018	2 2019	3 2020	4 2021	5 2022
1.	Prior	(61)	(82)	(81)	(131)	(134)
2.	2018	5,063	5,424	5,418	5,412	5,411
3.	2019	XXX	25,033	26,907	26,892	26,868
4.	2020	XXX	XXX	55,973	60,205	60,150
5.	2021	XXX	XXX	XXX	134,458	138,585
6.	2022	XXX	XXX	XXX	XXX	233,351

Section B - Incurred Health Claims - Title XVIII

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2018	2 2019	3 2020	4 2021	5 2022
1.	Prior	322	(82)	(81)	(131)	(134)
2.	2018	5,612	5,564	5,418	5,412	5,411
3.	2019	XXX	29,356	26,976	26,892	26,868
4.	2020	XXX	XXX	62,115	60,257	60,150
5.	2021	XXX	XXX	XXX	144,805	138,650
6.	2022	XXX	XXX	XXX	XXX	255,559

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Title XVIII

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2018	7,360	5,411	493	9.1	5,904	80.2	0	0	5,904	80.2
2. 2019	31,268	26,868	1,703	6.3	28,571	91.4	0	0	28,571	91.4
3. 2020	79,060	60,150	3,918	6.5	64,068	81.0	0	0	64,068	81.0
4. 2021	174,209	138,585	6,257	4.5	144,842	83.1	65	1	144,908	83.2
5. 2022	302,325	233,351	8,582	3.7	241,933	80.0	22,208	257	264,398	87.5

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(\$000 Omitted)

Section A - Paid Health Claims - Title XIX

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2018	2 2019	3 2020	4 2021	5 2022
1.	Prior	91,931	94,015	93,666	92,982	92,577
2.	2018	618,680	674,180	673,345	673,003	672,848
3.	2019	XXX	625,480	688,592	691,266	691,022
4.	2020	XXX	XXX	625,776	679,210	680,772
5.	2021	XXX	XXX	XXX	787,855	857,103
6.	2022	XXX	XXX	XXX	XXX	863,629

Section B - Incurred Health Claims - Title XIX

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2018	2 2019	3 2020	4 2021	5 2022
1.	Prior	96,447	94,015	93,666	92,982	92,577
2.	2018	685,965	678,112	673,345	673,003	672,848
3.	2019	XXX	714,493	694,603	691,266	691,022
4.	2020	XXX	XXX	701,408	685,553	680,772
5.	2021	XXX	XXX	XXX	853,889	864,235
6.	2022	XXX	XXX	XXX	XXX	952,157

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Title XIX

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2018	864,591	672,848	44,430	6.6	717,278	83.0	0	0	717,278	83.0
2. 2019	905,824	691,022	47,948	6.9	738,970	81.6	0	0	738,970	81.6
3. 2020	904,911	680,772	46,759	6.9	727,531	80.4	0	0	727,531	80.4
4. 2021	1,053,935	857,103	78,897	9.2	936,000	88.8	7,131	66	943,197	89.5
5. 2022	1,167,367	863,629	40,046	4.6	903,675	77.4	88,528	817	993,020	85.1

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(\$000 Omitted)

Section A - Paid Health Claims - Grand Total

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2018	2 2019	3 2020	4 2021	5 2022
1.	Prior	91,700	93,801	93,451	92,716	92,308
2.	2018	623,796	679,580	678,739	678,391	678,234
3.	2019	XXX	653,669	718,826	721,489	721,220
4.	2020	XXX	XXX	687,606	745,756	747,270
5.	2021	XXX	XXX	XXX	929,124	1,002,901
6.	2022	XXX	XXX	XXX	XXX	1,108,192

Section B - Incurred Health Claims - Grand Total

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2018	2 2019	3 2020	4 2021	5 2022
1.	Prior	96,604	93,801	93,451	92,716	92,308
2.	2018	691,637	683,653	678,739	678,391	678,234
3.	2019	XXX	747,393	724,911	721,489	721,220
4.	2020	XXX	XXX	770,176	752,181	747,270
5.	2021	XXX	XXX	XXX	1,006,231	1,010,171
6.	2022	XXX	XXX	XXX	XXX	1,220,761

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Grand Total

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2018	872,193	678,234	44,949	6.6	723,183	82.9	0	0	723,183	82.9
2. 2019	941,018	721,220	49,828	6.9	771,048	81.9	0	0	771,048	81.9
3. 2020	990,760	747,270	51,056	6.8	798,326	80.6	0	0	798,326	80.6
4. 2021	1,236,929	1,002,901	85,607	8.5	1,088,508	88.0	7,269	67	1,095,844	88.6
5. 2022	1,485,067	1,108,192	49,405	4.5	1,157,597	77.9	112,569	1,085	1,271,251	85.6

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2D - AGGREGATE RESERVE FOR ACCIDENT AND HEALTH CONTRACTS ONLY

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13
		2	3										
	Total	Individual	Group	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other
1. Unearned premium reserves	0	0	0	0	0	0	0	0	0	0	0	0	0
2. Additional policy reserves (a)	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Reserve for future contingent benefits	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Reserve for rate credits or experience rating refunds (including \$0 for investment income) ..	25,799,849	0	0	0	0	0	0	6,850,188	18,949,661	0	0	0	0
5. Aggregate write-ins for other policy reserves	12,142,834	4,289,696	929,376	0	0	0	0	27,329	6,896,433	0	0	0	0
6. Totals (gross)	37,942,683	4,289,696	929,376	0	0	0	0	6,877,517	25,846,094	0	0	0	0
7. Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Totals (Net)(Page 3, Line 4)	37,942,683	4,289,696	929,376	0	0	0	0	6,877,517	25,846,094	0	0	0	0
9. Present value of amounts not yet due on claims	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Reserve for future contingent benefits	1,379,362	18,318	0	0	0	0	0	39,467	1,321,577	0	0	0	0
11. Aggregate write-ins for other claim reserves	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals (gross)	1,379,362	18,318	0	0	0	0	0	39,467	1,321,577	0	0	0	0
13. Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Totals (Net)(Page 3, Line 7)	1,379,362	18,318	0	0	0	0	0	39,467	1,321,577	0	0	0	0
DETAILS OF WRITE-INS													
0501. Incentive Pool Payable	6,896,433	0	0	0	0	0	0	0	6,896,433	0	0	0	0
0502. ACA Risk Adjustment Payable	5,219,072	4,289,696	929,376	0	0	0	0	0	0	0	0	0	0
0503. CMS Risk Adjustment Factor Payable	27,329	0	0	0	0	0	0	27,329	0	0	0	0	0
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)	12,142,834	4,289,696	929,376	0	0	0	0	27,329	6,896,433	0	0	0	0
1101.													
1102.													
1103.													
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Includes \$0 premium deficiency reserve.

UNDERWRITING AND INVESTMENT EXHIBIT

	Claim Adjustment Expenses		3 General Administrative Expenses	4 Investment Expenses	5 Total
	1 Cost Containment Expenses	2 Other Claim Adjustment Expenses			
1. Rent (\$0 for occupancy of own building)	1,164,248	316,225	2,002,061	0	3,482,534
2. Salary, wages and other benefits	21,480,987	5,834,515	36,939,068	0	64,254,570
3. Commissions (less \$0 ceded plus \$0 assumed)	0	0	8,149,413	0	8,149,413
4. Legal fees and expenses	304,346	82,664	523,609	0	910,619
5. Certifications and accreditation fees	0	0	0	0	0
6. Auditing, actuarial and other consulting services ...	2,415,700	656,135	4,483,254	0	7,555,089
7. Traveling expenses	358,852	97,469	617,087	0	1,073,408
8. Marketing and advertising	1,278,993	347,391	2,201,879	0	3,828,263
9. Postage, express and telephone	892,509	242,417	1,534,774	0	2,669,700
10. Printing and office supplies	1,417,403	384,985	2,437,390	0	4,239,778
11. Occupancy, depreciation and amortization	537,155	145,898	923,700	0	1,606,753
12. Equipment	169,798	46,119	291,988	0	507,905
13. Cost or depreciation of EDP equipment and software	2,315,065	628,802	3,981,025	0	6,924,892
14. Outsourced services including EDP, claims, and other services	3,040,998	819,176	4,505,220	0	8,365,394
15. Boards, bureaus and association fees	30,675	8,332	124,300	0	163,307
16. Insurance, except on real estate	400,135	108,682	688,079	0	1,196,896
17. Collection and bank service charges	117,087	31,802	202,072	0	350,961
18. Group service and administration fees	853,031	122,506	775,601	0	1,751,138
19. Reimbursements by uninsured plans	0	0	(606,626)	0	(606,626)
20. Reimbursements from fiscal intermediaries	0	0	0	0	0
21. Real estate expenses	0	0	0	0	0
22. Real estate taxes	53,187	19,655	98,096	0	170,938
23. Taxes, licenses and fees:					
23.1 State and local insurance taxes	0	0	3,838,946	0	3,838,946
23.2 State premium taxes	0	0	0	0	0
23.3 Regulatory authority licenses and fees	0	0	71,898,329	0	71,898,329
23.4 Payroll taxes	1,066,698	394,191	1,967,371	0	3,428,260
23.5 Other (excluding federal income and real estate taxes)	0	0	0	0	0
24. Investment expenses not included elsewhere	0	0	0	91,432	91,432
25. Aggregate write-ins for expenses	7,323,539	1,384,907	10,031,791	0	18,740,237
26. Total expenses incurred (Lines 1 to 25)	45,220,406	11,671,871	157,608,427	91,432	(a) .....214,592,136
27. Less expenses unpaid December 31, current year	915,950	236,417	21,156,856	33,434	22,342,657
28. Add expenses unpaid December 31, prior year	599,243	194,463	25,691,939	34,919	26,520,564
29. Amounts receivable relating to uninsured plans, prior year	0	0	0	0	0
30. Amounts receivable relating to uninsured plans, current year	0	0	0	0	0
31. Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30)	44,903,699	11,629,917	162,143,510	92,917	218,770,043
DETAILS OF WRITE-INS					
2501. Information Technology	236,210	64,158	406,191	0	706,559
2502. Interest	21,872	7,961	111,337	0	141,170
2503. Managed Care & Network Access	22,632	6,040	1,121,472	0	1,150,144
2598. Summary of remaining write-ins for Line 25 from overflow page	7,042,825	1,306,748	8,392,791	0	16,742,364
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	7,323,539	1,384,907	10,031,791	0	18,740,237

(a) Includes management fees of \$94,965,657 to affiliates and \$0 to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. government bonds	(a) 124,061	..... 125,281
1.1	Bonds exempt from U.S. tax	(a) 0	..... 0
1.2	Other bonds (unaffiliated)	(a) 1,650,828	..... 1,877,959
1.3	Bonds of affiliates	(a) 0	..... 0
2.1	Preferred stocks (unaffiliated)	(b) 0	..... 0
2.11	Preferred stocks of affiliates	(b) 0	..... 0
2.2	Common stocks (unaffiliated) .....	..... 0	..... 0
2.21	Common stocks of affiliates .....	..... 0	..... 0
3.	Mortgage loans	(c) 0	..... 0
4.	Real estate	(d) 0	..... 0
5	Contract Loans .....	..... 0	..... 0
6	Cash, cash equivalents and short-term investments	(e) 3,904,956	..... 3,860,252
7	Derivative instruments	(f) 0	..... 0
8.	Other invested assets .....	..... (1,421,580)	..... (1,421,580)
9.	Aggregate write-ins for investment income .....	..... 0	..... 0
10.	Total gross investment income	4,258,265	4,441,912
11.	Investment expenses		(g) 91,432
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g) 0
13.	Interest expense		(h) 0
14.	Depreciation on real estate and other invested assets		(i) 0
15.	Aggregate write-ins for deductions from investment income .....		..... 0
16.	Total deductions (Lines 11 through 15) .....		..... 91,432
17.	Net investment income (Line 10 minus Line 16)		4,350,480
DETAILS OF WRITE-INS			
0901.	.....	
0902.	.....	
0903.	.....	
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0
1501.	.....	
1502.	.....	
1503.	.....	
1598.	Summary of remaining write-ins for Line 15 from overflow page		0
1599.	Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)		0

- (a) Includes \$ 140,040 accrual of discount less \$ 353,356 amortization of premium and less \$ 129,911 paid for accrued interest on purchases.
- (b) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued dividends on purchases.
- (c) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued interest on purchases.
- (d) Includes \$ 0 for company's occupancy of its own buildings; and excludes \$ 0 interest on encumbrances.
- (e) Includes \$ 490,788 accrual of discount less \$ 540,599 amortization of premium and less \$ 185,002 paid for accrued interest on purchases.
- (f) Includes \$ 0 accrual of discount less \$ 0 amortization of premium.
- (g) Includes \$. 0 investment expenses and \$ 0 investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ 0 interest on surplus notes and \$ 0 interest on capital notes.
- (i) Includes \$ 0 depreciation on real estate and \$ 0 depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1	2	3	4	5
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds	(589,651)	0	(589,651)	0	0
1.1	Bonds exempt from U.S. tax	0	0	0	0	0
1.2	Other bonds (unaffiliated)	(394,171)	0	(394,171)	0	0
1.3	Bonds of affiliates	0	0	0	0	0
2.1	Preferred stocks (unaffiliated)	0	0	0	0	0
2.11	Preferred stocks of affiliates	0	0	0	0	0
2.2	Common stocks (unaffiliated)	0	0	0	0	0
2.21	Common stocks of affiliates	0	0	0	0	0
3.	Mortgage loans	0	0	0	0	0
4.	Real estate	0	0	0	0	0
5.	Contract loans	0	0	0	0	0
6.	Cash, cash equivalents and short-term investments	(1,805)	0	(1,805)	0	0
7.	Derivative instruments	0	0	0	0	0
8.	Other invested assets	0	0	0	0	0
9.	Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10.	Total capital gains (losses)	(985,627)	0	(985,627)	0	0
DETAILS OF WRITE-INS						
0901.	.....				
0902.	.....				
0903.	.....				
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0	0	0	0

EXHIBIT OF NON-ADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D)	0	0	0
2. Stocks (Schedule D):			
2.1 Preferred stocks	0	0	0
2.2 Common stocks	0	0	0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens	0	0	0
3.2 Other than first liens	0	0	0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company	0	0	0
4.2 Properties held for the production of income	0	0	0
4.3 Properties held for sale	0	0	0
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)	0	0	0
6. Contract loans	0	0	0
7. Derivatives (Schedule DB)	0	0	0
8. Other invested assets (Schedule BA)	0	0	0
9. Receivables for securities	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL)	0	0	0
11. Aggregate write-ins for invested assets	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	0	0	0
13. Title plants (for Title insurers only)	0	0	0
14. Investment income due and accrued	0	0	0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection	75,154	16,550	(58,604)
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due ..	0	0	0
15.3 Accrued retrospective premiums and contracts subject to redetermination	0	0	0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers	0	0	0
16.2 Funds held by or deposited with reinsured companies	0	0	0
16.3 Other amounts receivable under reinsurance contracts	0	0	0
17. Amounts receivable relating to uninsured plans	2,347	50,081	47,734
18.1 Current federal and foreign income tax recoverable and interest thereon	0	0	0
18.2 Net deferred tax asset	0	0	0
19. Guaranty funds receivable or on deposit	0	0	0
20. Electronic data processing equipment and software	0	0	0
21. Furniture and equipment, including health care delivery assets	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0
23. Receivable from parent, subsidiaries and affiliates	0	0	0
24. Health care and other amounts receivable	3,345,438	4,949,226	1,603,788
25. Aggregate write-ins for other than invested assets	297	252	(45)
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	3,423,236	5,016,109	1,592,873
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
28. Total (Lines 26 and 27)	3,423,236	5,016,109	1,592,873
DETAILS OF WRITE-INS			
1101.			
1102.			
1103.			
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0
2501. Prepaid Commissions	231	0	(231)
2502. Miscellaneous Receivables	66	252	186
2503.			
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	297	252	(45)

EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

Source of Enrollment	Total Members at End of					6 Current Year Member Months
	1 Prior Year	2 First Quarter	3 Second Quarter	4 Third Quarter	5 Current Year	
1. Health Maintenance Organizations	310,916	320,149	323,224	325,371	329,073	3,881,402
2. Provider Service Organizations	0	0	0	0	0	0
3. Preferred Provider Organizations	0	0	0	0	0	0
4. Point of Service	0	0	0	0	0	0
5. Indemnity Only	0	0	0	0	0	0
6. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0
7. Total	310,916	320,149	323,224	325,371	329,073	3,881,402
DETAILS OF WRITE-INS						
0601.						
0602.						
0603.						
0698. Summary of remaining write-ins for Line 6 from overflow page	0	0	0	0	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	0	0	0	0	0

UNITEDHEALTHCARE COMMUNITY PLAN, INC.

**NOTES TO STATUTORY BASIS FINANCIAL STATEMENTS
AS OF AND FOR THE YEARS ENDED DECEMBER 31, 2022 AND 2021**

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES AND GOING CONCERN

Organization and Operation

UnitedHealthcare Community Plan, Inc. (the “Company”), licensed as a health maintenance organization (“HMO”), offers its enrollees a variety of managed care programs and products through contractual arrangements with health care providers. The Company is a wholly owned subsidiary of AmeriChoice Corporation (“AmeriChoice”). AmeriChoice is a wholly owned subsidiary of UnitedHealth Group Incorporated (“UnitedHealth Group”). UnitedHealth Group is a publicly held company trading on the New York Stock Exchange.

The Company was incorporated on October 11, 1994, as an HMO and operations commenced in October 1994. The Company is certified as an HMO by the Michigan Department of Insurance and Financial Services (the “Department”). The Company has entered into contracts with physicians, hospitals, and other health care provider organizations to deliver health care services for all enrollees. The Company is licensed in the State of Michigan.

The Company offers comprehensive commercial products to employer groups. Each contract outlines the coverage provided and renewal provisions. Effective January 1, 2022, the Company entered the Affordable Care Act (“ACA”) individual exchange in the State of Michigan.

The Company serves as a plan sponsor offering Medicare specialized programs including a Dual Special Needs Plan (collectively “Medicare Plans”) under contracts with the Centers for Medicare and Medicaid Services (“CMS”).

The Company has a contract with the State of Michigan, Department of Health and Human Services (“MDHHS”), to provide health care services to Healthy Michigan plan eligible beneficiaries in Michigan, which also includes adults whose income does not exceed 138% of federal poverty level as defined under the ACA and low-income or uninsured children. The Company also insures individuals under 21 with complex chronic conditions under the Children’s Specialty Health Care Services as part of the Medicaid contract. The current contract is effective through September 30, 2024.

A. Accounting Practices

The statutory basis financial statements (herein referred to as “financial statements”) are presented on the basis of accounting practices prescribed or permitted by the Department.

The Department recognizes only statutory accounting practices, prescribed or permitted by the State of Michigan (the “State”), for determining and reporting the financial condition and results of operations of an HMO, for determining its solvency under Michigan Insurance Law. The State prescribes the use of the National Association of Insurance Commissioners’ (“NAIC”) Accounting Practices and Procedures manual (“NAIC SAP”) in effect for the accounting periods covered in the financial statements.

No significant differences exist between the practices prescribed or permitted by the State and the NAIC SAP which materially affect the statutory basis net income and capital and surplus, as illustrated in the table below:

	SSAP #	F/S Page #	F/S Line #	December 31, 2022	December 31, 2021
Net Income					
(1) Company state basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	\$ 48,582,422	\$ 50,504,198
(2) State prescribed practices that are an increase/(decrease) from NAIC SAP: Not Applicable				-	-
(3) State permitted practices that are an increase/(decrease) from NAIC SAP: Not Applicable				-	-
(4) NAIC SAP (1 - 2 - 3 = 4)	XXX	XXX	XXX	<u>\$ 48,582,422</u>	<u>\$ 50,504,198</u>
Capital and Surplus					
(5) Company state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 186,840,277	\$ 136,815,531
(6) State prescribed practices that are an increase/(decrease) from NAIC SAP: Not Applicable				-	-
(7) State permitted practices that are an increase/(decrease) from NAIC SAP: Not Applicable				-	-
(8) NAIC SAP (5 - 6 - 7 = 8)	XXX	XXX	XXX	<u>\$ 186,840,277</u>	<u>\$ 136,815,531</u>

The Department specifically requires maternity case receivables due from MDHHS to be reported in health care receivables rather than as premiums and considerations as prescribed by NAIC SAP. The Company included \$4,500,927 and \$4,629,390 of maternity case receivables as of December 31, 2022 and 2021, respectively, in health care receivables in the financial statements. This has no impact on net income or capital and surplus for 2022 and 2021.

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of these financial statements in conformity with the NAIC Annual Statement Instructions and the NAIC SAP include certain amounts that are based on the Company’s estimates and judgments. These estimates require the Company to apply complex assumptions and judgments, often because the Company must make estimates about the effects of matters that are inherently uncertain and will change in subsequent periods. The most significant estimates relate to hospital and medical benefits, claims unpaid, aggregate health policy reserves (including medical loss ratio (“MLR”) rebates), aggregate health claim reserves, risk corridor, and risk adjustment estimates. The Company adjusts these estimates each period as more current information becomes available. The impact of any changes in estimates is included in the determination of net income in the period in which the estimate is adjusted.

C. Accounting Policy

Basis of Presentation — The Company prepares its financial statements on the basis of accounting practices prescribed or permitted by the Department. These statutory practices differ from accounting principles generally accepted in the United States of America (“GAAP”).

Accounting policy disclosures that are required by the NAIC Annual Statement instructions are as follows:

- (1–2) Bonds and short-term investments are stated at book/adjusted carrying value if they meet NAIC designation of one or two and stated at the lower of book/adjusted carrying value or fair value if they meet an NAIC designation of three or higher. The Company does not have any mandatory convertible securities or Investment Analysis Office of the NAIC (“IAO”) identified funds (i.e.: exchange traded funds or bond mutual funds) in its bond portfolio. Amortization of bond premium or accretion of discount is calculated using the constant yield interest method. Bonds and short-term investments are valued and reported using market prices published by the IAO in accordance with the NAIC Valuation of Securities manual prepared by the IAO or an external pricing service;
- (3–4) The Company holds no common or preferred stock;
- (5) The Company holds no mortgage loans on real estate;

- (6) U.S. government and agency securities and corporate debt securities include loan-backed securities (mortgage-backed securities and asset-backed securities), which are valued using the retrospective adjustment methodology. Prepayment assumptions for the determination of the book/adjusted carrying value, commonly referred to as amortized cost, of loan-backed securities are based on a three-month constant prepayment rate history obtained from external data source vendors. The Company's investment policy limits investments in nonagency residential mortgage-backed securities, including home equity and sub-prime mortgages, to 10% of total cash and invested assets. Total combined investments in mortgage-backed securities and asset-backed securities cannot exceed more than 30% of total cash and invested assets;
- (7) The Company holds no investments in subsidiaries, controlled, or affiliated entities;
- (8) The Company has no investment interests with respect to joint ventures, partnerships, or limited liability companies;
- (9) The Company holds no derivatives;
- (10) Premium deficiency reserves ("PDR") (inclusive of conversion reserves) and the related expenses are recognized when it is probable that expected future health care expenses, claims adjustment expenses ("CAE"), direct administration costs, and an allocation of indirect administration costs under a group of existing contracts will exceed anticipated future premiums and reinsurance recoveries considered over the remaining lives of the contracts, and are recorded as aggregate health policy reserves in the financial statements. Indirect administration costs arise from activities that are not specifically identifiable to a specific group of existing contracts, and therefore, those costs are fully allocated among the various contract groupings. The allocation of indirect administration costs to each contract grouping is made proportionately to the expected margins remaining in the premiums after future health care expenses, CAE and direct administration costs are considered. The data and assumptions underlying such estimates and the resulting reserves are periodically updated, and any adjustments are reflected as an increase (decrease) in reserves for life, accident, and health contracts in the financial statements in the period in which the change in estimate is identified. The Company does anticipate investment income as a factor in the PDR calculation (see Note 30);
- (11) CAE are those costs expected to be incurred in connection with the adjustment and recording of accident and health claims. Pursuant to the terms of the Agreement (see Note 10), the Company pays a management fee to its affiliate, United HealthCare Services, Inc. ("UHS"), in exchange for administrative and management services. A detailed review of the administrative expenses of the Company and UHS is performed to determine the allocation between CAE and general administrative expenses ("GAE") to be reported in the financial statements. It is the responsibility of UHS to pay CAE in the event the Company ceases operations. The Company has recorded an estimate of unpaid CAE associated with incurred but unpaid claims, which is included in unpaid CAE in the financial statements. Management believes the amount of the liability for unpaid CAE as of December 31, 2022 is adequate to cover the Company's cost for the adjustment and recording of unpaid claims; however, actual expenses may differ from those established estimates. Adjustments to the estimates for unpaid CAE are reflected in operating results in the period in which the change in estimate is identified;
- (12) The Company does not carry any fixed assets in the financial statements;
- (13) Health care and other amounts receivable consist of pharmacy rebates receivable estimated based on the most currently available data from the Company's claims processing systems and from data provided by the Company's affiliated pharmaceutical benefit manager, OptumRx, Inc. ("OptumRx"). Health care and other amounts receivable also include maternity case receivables due from MDHHS per guidance from the Department, capitation arrangement receivables, and receivables for claim overpayments to providers and other health care organizations. Health care and other amounts receivable are considered nonadmitted assets under the NAIC SAP if they do not meet admissibility requirements. Accordingly, the Company has excluded receivables that do not meet the admissibility criteria from the financial statements (see Note 28).

The Company has also deemed the following to be significant accounting policies:

ASSETS

Cash and Invested Assets

- Bonds include securities with a maturity of greater than one year at the time of purchase;

- Cash equivalents include securities that have original maturity dates of three months or less from the date of acquisition. Cash equivalents, excluding money-market funds, are reported at cost or book/adjusted carrying value depending on the nature of the underlying security, which approximates fair value. Money-market funds are reported at fair value or net asset value ("NAV") as a practical expedient;
- Short-term investments include securities that have a maturity of greater than three months but less than one year at the time of purchase;
- Realized capital gains and losses on sales of investments are calculated based upon specific identification of the investments sold. These gains and losses are reported as net realized capital (losses) gains less capital gains (benefit) tax ("net realized capital gains (losses) less taxes) in the financial statements;
- The Company continually monitors the difference between amortized cost and estimated fair value of its investments. If any of the Company's investments experience a decline in value that the Company has determined is other-than-temporary, or if the Company has determined it will sell a security that is in an impaired status, the Company will record a realized loss in net realized capital gains (losses) less taxes, in the financial statements. The new cost basis is not changed for subsequent recoveries in fair value. The prospective adjustment method is utilized for loan-backed securities for periods subsequent to the loss recognition (see Note 5).

Other Assets

- **Premiums and Considerations** — The Company reports uncollected premium balances from its insured members, groups, CMS, and state Medicaid agency as premiums and considerations in the financial statements. Uncollected premium balances that are over 90 days past due, with the exception of amounts due from government insured plans, are considered nonadmitted assets. In addition to those balances, current balances are also considered nonadmitted if the corresponding balance greater than 90 days past due is deemed more than inconsequential. Premiums and considerations also include amounts for commercial risk adjustment receivables as defined in Section 1343 of the ACA, CMS risk adjustment receivables for the Medicare Plans, and pay for performance program receivables from MDHHS.

Premium adjustments for the commercial ACA Section 1343 risk adjustment, CMS risk adjustment, and MDHHS pay for performance programs are accounted for as premium adjustments subject to redetermination (see Note 24).

LIABILITIES

- **Claims Unpaid and Aggregate Health Claim Reserves** — Claims unpaid and aggregate health claim reserves include claims processed but not yet paid, estimates for claims received but not yet processed, estimates for the costs of health care services enrollees have received but for which claims have not yet been submitted, and payments and liabilities for physician, hospital, and other medical costs disputes.

The estimates for incurred but not yet reported claims are developed using an actuarial process that is consistently applied, centrally controlled, and automated. The actuarial models consider factors such as historical submission and payment data, cost trends, customer and product mix, seasonality, utilization of health care services, contracted service rates, and other relevant factors. The Company estimates such liabilities for physician, hospital, and other medical cost disputes based upon an analysis of potential outcomes, assuming a combination of litigation and settlement strategies. These estimates may change as actuarial methods change or as underlying facts upon which estimates are based change. The Company did not change actuarial methods during 2022 and 2021. Management believes the amount of claims unpaid and aggregate health claim reserves is a best estimate of the Company's liability for unpaid claims and aggregate health claim reserves as of December 31, 2022; however, actual payments may differ from those established estimates.

The Company contracts with hospitals, physicians, and other providers of health care under capitated or discounted fee for service arrangements, including a hospital per diem to provide medical care services to enrollees. Some of these contracts are with related parties (see Note 10). Capitated providers are at risk for the cost of medical care services provided to the Company's enrollees; however, the Company is ultimately responsible for the provision of services to its enrollees should the capitated provider be unable to provide the contracted services.

- **Aggregate Health Policy Reserves** — Aggregate health policy reserves includes commercial risk adjustment payables as defined in Section 1343 of the ACA, CMS risk corridor payables, CMS risk adjustment payables for the Medicare plans, estimated MLR rebates payable on the Medicare plans, risk corridor payables due to MDHHS, comprehensive commercial, Medicaid and CMS risk adjustment payables for the Medicare Plans, risk adjustment payables due to MDHHS, and unearned premiums are established for the portion of premiums received during the current period that are partially unearned at the end of the period.

Premium adjustments for the estimated MLR rebates, MDHHS risk corridor, and CMS risk corridor programs are accounted for as premium adjustments subject to retrospectively rated features (see Note 24). Premium adjustments for the commercial ACA Section 1343 risk adjustment, CMS risk adjustment, and MDHHS risk pool payables are accounted for as premium adjustments subject to redetermination (see Note 24).

- **General Expenses Due or Accrued** — General expenses that are due as of the reporting date in addition to general expenses that have been incurred but are not due until a subsequent period are reported as general expenses due or accrued in the financial statements.

CAPITAL AND SURPLUS AND MINIMUM STATUTORY REQUIREMENTS

- **Restricted Cash Reserves** — The Company is in compliance with the State regulatory deposit requirements as of December 31, 2022 and 2021, respectively, for qualification purposes as a domestic insurer. These restricted cash reserves are stated at book/adjusted carrying value, which approximates fair value. These restricted deposits are included in bonds in the financial statements. Interest earned on these deposits accrues to the Company (see Note 5).
- **Minimum Capital and Surplus** — Under the laws of the State of Michigan, the Department requires the Company to maintain a minimum capital and surplus equal to the greater of \$3,000,000; 10% of total revenues; or three months of uncovered expenditures as of December 31, 2022 and 2021. The minimum capital and surplus requirement was \$148,506,679 and \$123,692,904, for December 31, 2022 and 2021, respectively, which was based on percentage of total revenues, as that produced the highest minimum requirement.

Risk-based capital (“RBC”) is a regulatory tool for measuring the minimum amount of capital appropriate for a managed care organization to support its overall business operations in consideration of its size and risk profile. The Department requires the Company to maintain minimum capital and surplus equal to the greater of the state statute as outlined above, or the company action level as calculated by the RBC formula or the level needed to avoid action pursuant to the trend test in the RBC formula.

The Company is in compliance with the minimum required capital and surplus amounts where it is licensed to do business, as of December 31, 2022 and 2021.

STATEMENTS OF OPERATIONS

- **Net Premium Income and Change in Unearned Premium Reserves and Reserve for Rate Credits** — Revenues consist of net premium income that is recognized in the period in which enrollees are entitled to receive health care services. Net premium income is shown net of reinsurance premiums paid and reinsurance premiums incurred but not paid in the financial statements. The corresponding change in unearned premium from year to year is reflected as a change in unearned premium reserves and reserve for rate credits in the financial statements.

Comprehensive commercial health plans with MLRs on fully insured products, as calculated under the definitions in the ACA and implementing regulations, that fall below certain targets are required to rebate ratable portions of premiums annually. The Company classifies changes to the estimated rebates and retrospective premium adjustments as change in unearned premium reserves and reserve for rate credits in the financial statements (see Note 24). In addition, pursuant to Section 1342 and Section 1343 of the ACA, the Company records premium adjustments for changes to the commercial risk corridor and risk adjustment balances which are reflected in change in unearned premium reserves and reserve for rate credits and net premium income, respectively, in the financial statements (see Note 24).

Medicare Plans with MLRs on fully insured products, as calculated under the definitions in the ACA and implementing regulations, that fall below certain targets are required to rebate ratable portions of premiums annually. In addition, the Company records premium adjustments for changes to the CMS Medicare Plans risk corridor program. Changes to these estimates are reflected in change in unearned premium reserves and reserve for rate credits in the financial statements (see Note 24). Net premium income also includes premium under the Medicare Plans which includes CMS premiums, including amounts pursuant to the CMS risk adjustment program (see Note 24), and member premiums, and the CMS low-income premium subsidy for the Company's insurance risk coverage.

The Medicaid plan is subject to experience rated rebates, including MLRs and risk corridor programs, risk adjustment program, and performance guarantees based on various utilization measures. The Company records premium adjustments for the changes to the estimates for experience rated rebates and risk corridor programs which are reflected in change in unearned premium reserves and reserve for rate credits and for the risk adjustment program and performance guarantees which are reflected in net premium income in the financial statements (see Note 24). Net premium income also includes amounts paid by state and federal governments on a per member basis in exchange for the provision and administration of medical benefits under the Medicaid program and maternity payments. Premiums are contractual and are recognized in the coverage period in which members are entitled to receive services, except in the case of maternity payments. Maternity income is billed on contractual rates and recognized as income as each birth case is identified by the Company.

- **Total Hospital and Medical Expenses** — Total hospital and medical expenses include claims paid, claims processed but not yet paid, estimates for claims received but not yet processed, estimates for the costs of health care services enrollees have received but for which claims have not yet been submitted, and payments and liabilities for physician, hospital, and other medical costs disputes.

Total hospital and medical expenses also include amounts incurred for incentive pool, withhold adjustments, and bonus amounts that are based on the underlying contractual provisions with the respective providers. In addition, adjustments to claims unpaid estimates and aggregate health claim reserves are reflected in the period once the change in estimate is identified and included in total hospital and medical expenses in the financial statements.

- **General Administrative Expenses** — General expenses that have been paid as of the reporting date in addition to general expenses that have been incurred but are not due until a subsequent period are reported as general administrative expenses. Pursuant to the terms of the Agreement (see Note 10), the Company pays a management fee to UHS in exchange for administrative and management services. Costs for items not included within the scope of the Agreement are directly expensed as incurred. State income taxes and state based assessments were also a component of GAE. A detailed review of the administrative expenses of the Company and UHS is performed to determine the allocation between CAE and GAE to be reported in the financial statements.

OTHER

- **Vulnerability Due to Certain Concentrations** — The Company is subject to substantial federal and state government regulation, including licensing and other requirements relating to the offering of the Company's existing products in new markets and offerings of new products, both of which may restrict the Company's ability to expand its business.

The Company has no commercial customers that individually exceed 10% of total direct premiums written and uncollected premiums, including receivables for contracts subject to redetermination, for the years ended December 31, 2022 and 2021.

Direct premiums written and uncollected premiums, including receivables for contracts subject to redetermination, from members and CMS related to the Medicare Plans as a percentage of total direct premiums written and total uncollected premiums, including receivables for contracts subject to redetermination, are 22% and 27% as of December 31, 2022 and 13% and 13% as of December 31, 2021, respectively.

Direct premiums written and uncollected premiums, including receivables for contracts subject to redetermination, from the MDHHS as a percentage of total direct premiums written and total uncollected premiums, including receivables for contracts subject to redetermination, are 77% and 73% as of December 31, 2022 and 86% and 87% as of December 31, 2021, respectively.

Recently Issued Accounting Standards — The Company reviewed all recently issued guidance in 2022 and 2021 that has been adopted for 2022 or subsequent years' implementation and has determined that none of the items would have a significant impact to the financial statements.

D. Going Concern

The Company has the ability and will continue to operate for a period of time sufficient to carry out its commitments, obligations and business objectives.

2. ACCOUNTING CHANGES AND CORRECTIONS OF ERRORS

No changes in accounting principles or corrections of errors have been recorded during the years ended December 31, 2022 and 2021.

3. BUSINESS COMBINATIONS AND GOODWILL

A–E. The Company was not party to a business combination during the years ended December 31, 2022 and 2021, and does not carry goodwill in its financial statements.

4. DISCONTINUED OPERATIONS

A. Discontinued Operation Disposed of or Classified as Held for Sale

(1–4) The Company did not have any discontinued operations disposed of or classified as held for sale during 2022 and 2021.

B. Change in Plan of Sale of Discontinued Operation — Not applicable.

C. Nature of any Significant Continuing Involvement with Discontinued Operations after Disposal — Not applicable.

D. Equity Interest Retained in the Discontinued Operation after Disposal — Not applicable.

5. INVESTMENTS

For purposes of calculating gross realized gains and losses on sales of investments, the amortized cost of each investment sold is used. The gross realized gains and losses on sales of long-term investments were \$9,241 and \$977,174, respectively, for 2022 and \$270,842 and \$0, respectively, for 2021. The net realized gain is included in net realized capital gains (losses) less taxes in the financial statements. Total proceeds on the sale of long-term investments were \$21,476,846 and \$5,045,815 in 2022 and 2021, respectively.

As of December 31, 2022 and 2021, the book/adjusted carrying value, fair value, and gross unrecognized unrealized gains and losses of the Company’s investments, excluding cash and cash equivalents of \$154,200,850 and \$184,725,957 respectively, are disclosed in the table below:

	2022				
	Book/Adjusted Carrying Value	Gross Unrecognized	Gross Unrecognized	Gross Unrecognized	Fair Value
		Unrealized Gains	Unrealized Losses < 1 Year	Unrealized Losses > 1 Year	
U.S. government and agency securities	\$ 60,363,275	\$ 2,725	\$ 1,654,888	\$ 1,303,381	\$ 57,407,731
State and agency municipal securities	6,496,253	40,445	135,065	8,108	6,393,525
City and county municipal securities	4,687,265	8,278	245,440	63,607	4,386,496
Corporate debt securities	75,945,499	87,340	1,770,381	976,522	73,285,936
Other invested assets	<u>8,987,012</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>8,987,012</u>
Total bonds, short-term investments and other invested assets	<u>\$ 156,479,304</u>	<u>\$ 138,788</u>	<u>\$ 3,805,774</u>	<u>\$ 2,351,618</u>	<u>\$ 150,460,700</u>

	2022				
	Book/Adjusted Carrying Value	Gross Unrecognized	Gross Unrecognized	Gross Unrecognized	Fair Value
		Unrealized Gains	Unrealized Losses < 1 Year	Unrealized Losses > 1 Year	
Less than one year	\$ 68,302,513	\$ 8,795	\$ 260,498	\$ -	\$ 68,050,810
One to five years	12,547,232	11,129	182,112	264,052	12,112,197
Five to ten years	37,730,347	74,160	1,849,802	1,492,406	34,462,299
Over ten years	<u>37,899,212</u>	<u>44,704</u>	<u>1,513,362</u>	<u>595,160</u>	<u>35,835,394</u>
Total bonds, short-term investments and other invested assets	<u>\$ 156,479,304</u>	<u>\$ 138,788</u>	<u>\$ 3,805,774</u>	<u>\$ 2,351,618</u>	<u>\$ 150,460,700</u>

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	Book/Adjusted Carrying Value	2021			Fair Value
		Gross Unrecognized Unrealized Gains	Gross Unrecognized Unrealized Losses < 1 Year	Gross Unrecognized Unrealized Losses > 1 Year	
U.S. government and agency securities	\$ 56,815,005	\$ 305,694	\$ 225,227	\$ 282,671	\$ 56,612,801
State and agency municipal securities	5,110,379	312,176	1,691	-	5,420,864
City and county municipal securities	5,707,652	222,413	53	-	5,930,012
Corporate debt securities	82,669,815	712,418	111,638	18,495	83,252,100
Other invested assets	10,408,592	-	-	-	10,408,592
Total bonds, short-term investments, and other invested assets	<u>\$ 160,711,443</u>	<u>\$ 1,552,701</u>	<u>\$ 338,609</u>	<u>\$ 301,166</u>	<u>\$ 161,624,369</u>

Included in U.S. government and agency securities and corporate debt securities in the tables above are mortgage-related loan-backed securities, which do not have a single maturity date. For the years to maturity table above, these securities have been presented in the maturity group based on the securities' final maturity date and at a book/adjusted carrying value of \$34,784,301 and fair value of \$32,432,157.

The following table illustrates the fair value and gross unrecognized unrealized losses, aggregated by investment category and length of time that the individual securities have been in a continuous unrecognized unrealized loss position as of December 31, 2022 and 2021:

	2022					
	< 1 Year		> 1 Year		Total	
	Fair Value	Gross Unrecognized Unrealized Losses	Fair Value	Gross Unrecognized Unrealized Losses	Fair Value	Gross Unrecognized Unrealized Losses
U.S. government and agency securities	\$ 45,510,202	\$ 1,654,888	\$ 6,153,674	\$ 1,303,381	\$ 51,663,876	\$ 2,958,269
State and agency municipal securities	3,567,351	135,065	68,014	8,108	3,635,365	143,173
City and county municipal securities	2,829,353	245,440	412,575	63,607	3,241,928	309,047
Corporate debt securities	48,556,649	1,770,381	8,641,086	976,522	57,197,735	2,746,903
Total bonds and short-term investments	<u>\$ 100,463,555</u>	<u>\$ 3,805,774</u>	<u>\$ 15,275,349</u>	<u>\$ 2,351,618</u>	<u>\$ 115,738,904</u>	<u>\$ 6,157,392</u>

	2021					
	< 1 Year		> 1 Year		Total	
	Fair Value	Gross Unrecognized Unrealized Losses	Fair Value	Gross Unrecognized Unrealized Losses	Fair Value	Gross Unrecognized Unrealized Losses
U.S. government and agency securities	\$ 42,273,937	\$ 225,227	\$ 4,558,599	\$ 282,671	\$ 46,832,536	\$ 507,898
State and agency municipal securities	75,204	1,691	-	-	75,204	1,691
City and county municipal securities	487,988	53	-	-	487,988	53
Corporate debt securities	48,272,793	111,638	603,324	18,495	48,876,117	130,133
Total bonds and short-term investments	<u>\$ 91,109,922</u>	<u>\$ 338,609</u>	<u>\$ 5,161,923</u>	<u>\$ 301,166</u>	<u>\$ 96,271,845</u>	<u>\$ 639,775</u>

The unrecognized unrealized losses on investments in U.S. government and agency securities, state and agency municipal securities, city and county municipal securities, and corporate debt securities at December 31, 2022 and 2021, were mainly caused by interest rate fluctuations and not by unfavorable changes in the credit ratings associated with these securities. The Company evaluates impairment at each reporting period for each of the securities whereby the fair value of the investment is less than its book/adjusted carrying value. The contractual cash flows of the U.S. government and agency securities are guaranteed either by the U.S. government or an agency of the U.S. government. It is expected that the securities would not be settled at a price less than the cost of the investment, and the Company does not intend to sell the investment until the unrealized loss is fully recovered. The Company assessed the credit quality of the state and agency municipal securities, city and county municipal securities and corporate debt securities, noting whether a significant deterioration since purchase or other factors that may indicate an other-than temporary impairment ("OTTI"), such as the length of time and extent to which fair value has been less than cost, the financial condition, and near term prospects of the issuer as well as specific events or circumstances that may influence the operations of the issuer and the Company's intent to sell the investment. Additionally, the Company evaluated its intent and ability to retain loan-backed securities for a period of time sufficient to recover the amortized cost. As a result of these reviews, the Company recorded no OTTIs as of December 31, 2022 and 2021.

A–C. The Company has no mortgage loans, real estate loans, restructured debt, or reverse mortgages. The Company also has no real estate property occupied by the Company, real estate property held for the production of income, or real estate property held for sale.

D. Loan-Backed Securities

- (1) U.S. government and agency securities and corporate debt securities include loan-backed securities (mortgage-backed securities and asset-backed securities), which are valued using the retrospective adjustment methodology. Prepayment assumptions for the determination of the book/adjusted carrying value, commonly referred to as amortized cost, of loan-backed securities are based on a three-month constant prepayment rate history obtained from external data source vendors.
- (2) The Company did not recognize any OTTI's on loan-backed securities as of December 31, 2022.
- (3) The Company did not have any loan-backed securities with OTTI's to report by CUSIP as of December 31, 2022 or 2021.
- (4) The following table illustrates the fair value, gross unrecognized unrealized losses, and length of time that the loan-backed securities have been in a continuous unrecognized unrealized loss position as of December 31, 2022 and 2021:

	2022
The aggregate amount of unrealized losses:	
1. Less than 12 months	\$ 1,695,816
2. 12 months or longer	673,539
The aggregate related fair value of securities with unrealized losses:	
1. Less than 12 months	24,330,551
2. 12 months or longer	6,739,296
	2021
The aggregate amount of unrealized losses:	
1. Less than 12 months	\$ 76,915
2. 12 months or longer	18,495
The aggregate related fair value of securities with unrealized losses:	
1. Less than 12 months	12,182,475
2. 12 months or longer	603,324

- (5) The Company believes that it will continue to collect timely the principal and interest due on its loan-backed securities that have an amortized cost in excess of fair value. The unrealized losses were primarily caused by interest rate changes and not by unfavorable changes in the credit quality associated with these securities that impacted the assessment on collectability of principal and interest. At each reporting period, the Company evaluates available-for-sale debt securities for any credit-related impairment when the fair value of the investment is less than its amortized cost. The Company evaluated the expected cash flows and the underlying credit quality and credit ratings of the issuers, noting no significant credit deterioration since purchase. As of December 31, 2022, the unrealized loss on any security that the Company classified as available for sale was not material to the Company's investment portfolio. Any other securities in an unrealized loss position as of December 31, 2022, the Company considers to be temporary.

- E. Dollar Repurchase Agreements and/or Securities Lending Transactions — Not applicable.
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing — Not applicable.
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing — Not applicable.
- H. Repurchase Agreements Transactions Accounted for as a Sale — Not applicable.
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale — Not applicable.
- J. Real Estate — Not applicable.

K. Low-Income Housing Tax Credits (“LIHTC”)

(1–7) LIHTC investments of \$8,987,012 and \$10,408,592 as of December 31, 2022 and 2021, respectively, are included in other invested assets in the financial statements. The number of remaining years of unexpired tax credits is 6 years and the required holding period for the LIHTC investments is 11 years. The LIHTC investments are not currently subject to any regulatory reviews. The Company did not recognize any impairment losses, write-downs, or reclassifications during 2022 or 2021.

L. Restricted Assets

(1) Restricted assets, including pledged securities as of December 31, 2022 and 2021, are presented below:

Restricted Asset Category	1 Total Gross (Admitted & Nonadmitted) Restricted From Current Year	2 Total Gross (Admitted & Nonadmitted) Restricted From Prior Year	3 Increase/ (Decrease) (1 Minus 2)	4 Total Current Year Nonadmitted Restricted	5 Total Current Year Admitted Restricted (1 minus 4)	6 Gross (Admitted & Nonadmitted) Restricted to Total Assets (a)	7 Admitted Restricted to Total Admitted Assets (b)
a. Subject to contractual obligation for which liability is not shown	\$ -	\$ -	\$ -	\$ -	\$ -	0 %	0 %
b. Collateral held under security lending agreements	-	-	-	-	-	0 %	0 %
c. Subject to repurchase agreements	-	-	-	-	-	0 %	0 %
d. Subject to reverse repurchase agreements	-	-	-	-	-	0 %	0 %
e. Subject to dollar repurchase agreements	-	-	-	-	-	0 %	0 %
f. Subject to dollar reverse repurchase agreements	-	-	-	-	-	0 %	0 %
g. Placed under option contracts	-	-	-	-	-	0 %	0 %
h. Letter stock or securities restricted as to sale—excluding FHLB capital stock	-	-	-	-	-	0 %	0 %
i. FHLB capital stock	-	-	-	-	-	0 %	0 %
j. On deposit with states	1,106,065	1,112,903	(6,838)	-	1,106,065	<1%	<1%
k. On deposit with other regulatory bodies	-	-	-	-	-	0 %	0 %
l. Pledged as collateral to FHLB (including assets backing funding agreements)	-	-	-	-	-	0 %	0 %
m. Pledged as collateral not captured in other categories	-	-	-	-	-	0 %	0 %
n. Other restricted assets	-	-	-	-	-	0 %	0 %
o. Total restricted assets	\$ 1,106,065	\$ 1,112,903	\$ (6,838)	\$ -	\$ 1,106,065	<1%	<1%

(a) Column 1 divided by Asset Page, Column 1, Line 28
(b) Column 5 divided by Asset Page, Column 3, Line 28

(2–4) The Company has no assets pledged as collateral not captured in other categories and no other restricted assets as of December 31, 2022 or 2021.

M. Working Capital Finance Investments — Not applicable.

N. Offsetting and Netting of Assets and Liabilities

The Company does not have any offsetting or netting of assets and liabilities as it relates to derivatives, repurchase and reverse repurchase agreements, and securities borrowing and securities lending activities.

O. 5GI Securities

The Company does not have any investments with an NAIC designation of 5GI as of December 31, 2022 and 2021.

P. Short Sales — Not applicable.

Q. Prepayment Penalty and Acceleration Fees

The following table illustrates prepayment penalty and acceleration fees as of December 31, 2022:

	General Account
1. Number of CUSIPs	7
2. Aggregate Amount of Investment Income	\$ 21,014

R. Reporting Entity’s Share of Cash Pool by Asset Type — Not applicable.

6. JOINT VENTURES, PARTNERSHIPS, AND LIMITED LIABILITY COMPANIES

A–B. The Company has no investments in joint ventures, partnerships, or limited liability companies that exceed 10% of admitted assets and did not recognize any impairment write-down for its investments in joint ventures, partnerships, and limited liability companies during the statement periods.

7. INVESTMENT INCOME

- A. The Company excludes all investment income due and accrued amounts that are over 90 days past due from the financial statements.
- B. There were no investment income amounts excluded from the financial statements.

8. DERIVATIVE INSTRUMENTS

A–B. The Company has no derivative instruments.

9. INCOME TAXES

The Company is included in the consolidated federal income tax return with its ultimate parent, UnitedHealth Group. The Company does not expect to be liable for the Corporate Alternative Minimum Tax in 2023.

A. Deferred Tax Asset/Liability

(1) The components of the net deferred tax asset at December 31, 2022 and 2021 are as follows:

	2022			2021			Change		
	1	2	3	4	5	6	7	8	9
	Ordinary	Capital	(Col 1+2) Total	Ordinary	Capital	(Col 4+5) Total	(Col 1 - 4) Ordinary	(Col 2 - 5) Capital	(Col 7+8) Total
(a) Gross deferred tax assets	\$ 1,393,851	\$ -	\$ 1,393,851	\$ 1,554,297	\$ -	\$ 1,554,297	\$ (160,446)	\$ -	\$ (160,446)
(b) Statutory valuation allowance adjustments	-	-	-	-	-	-	-	-	-
(c) Adjusted gross deferred tax assets (1a - 1b)	1,393,851	-	1,393,851	1,554,297	-	1,554,297	(160,446)	-	(160,446)
(d) Deferred tax assets nonadmitted	-	-	-	-	-	-	-	-	-
(e) Subtotal net admitted deferred tax asset (1c - 1d)	1,393,851	-	1,393,851	1,554,297	-	1,554,297	(160,446)	-	(160,446)
(f) Deferred tax liabilities	111,607	-	111,607	121,504	-	121,504	(9,897)	-	(9,897)
(g) Net admitted deferred tax asset/(net deferred tax liability) (1e - 1f)	\$ 1,282,244	\$ -	\$ 1,282,244	\$ 1,432,793	\$ -	\$ 1,432,793	\$ (150,549)	\$ -	\$ (150,549)

(2) The components of the adjusted gross deferred tax assets admissibility calculation under SSAP No. 101, *Income Taxes*, are as follows:

	2022			2021			Change		
	1	2	3	4	5	6	7	8	9
Admission Calculation			(Col 1 + 2)			(Col 4 + 5)	(Col 1 - 4)	(Col 2 - 5)	(Col 7 + 8)
Components SSAP No. 101	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$ 1,393,851	\$ -	\$ 1,393,851	\$ 1,554,297	\$ -	\$ 1,554,297	\$ (160,446)	\$ -	\$ (160,446)
(b) Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation. (The lesser of 2(b)1 and 2(b)2 below)	-	-	-	-	-	-	-	-	-
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date	-	-	-	-	-	-	-	-	-
2. Adjusted gross deferred tax assets allowed per limitation threshold	XXX	XXX	27,833,705	XXX	XXX	20,307,411	XXX	XXX	7,526,294
(c) Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by gross deferred tax liabilities	-	-	-	-	-	-	-	-	-
(d) Deferred tax assets admitted as the result of application of SSAP No. 101									
Total 2(a) + 2(b) + 2(c))	\$ 1,393,851	\$ -	\$ 1,393,851	\$ 1,554,297	\$ -	\$ 1,554,297	\$ (160,446)	\$ -	\$ (160,446)

(3) The ratio percentage and adjusted capital and surplus used to determine the recovery period and threshold limitations for the admissibility calculation are presented below:

	2022	2021
(a) Ratio percentage used to determine recovery period and threshold limitation amount	>300%	>300%
(b) Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)(2) above	\$ 185,558,033	\$ 135,382,738

(4) The impact to the gross deferred tax assets balances as a result of tax-planning strategies as of December 31, 2022 and 2021 is presented below:

	2022		2021		Change	
	1	2	3	4	5	6
Impact of Tax-Planning Strategies	Ordinary	Capital	Ordinary	Capital	(Col 1 - 3) Ordinary	(Col 2 - 4) Capital
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets by tax character as a percentage.						
1. Adjusted gross DTAs amount from Note 9A1(c)	\$ 1,393,851	\$ -	\$ 1,554,297	\$ -	\$ (160,446)	\$ -
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax-planning strategies	- %	- %	- %	- %	- %	- %
3. Net admitted adjusted gross DTAs amount from Note 9A1(e)	\$ 1,393,851	\$ -	\$ 1,554,297	\$ -	\$ (160,446)	\$ -
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax-planning strategies	- %	- %	- %	- %	- %	- %
(b) Does the Company's tax-planning strategies include the use of reinsurance?	Yes _____		No <u>X</u> _____			

B. Unrecognized Deferred Tax Liabilities

(1–4) There are no unrecognized deferred tax liabilities for the years ended December 31, 2022 and 2021.

C. Significant Components of Income Taxes

(1) The current federal and foreign income taxes incurred for the years ended December 31, 2022 and 2021 are as follows:

	1	2	3
	2022	2021	(Col 1 - 2) Change
1. Current income tax			
(a) Federal	\$ 11,410,476	\$ 11,667,161	\$ (256,685)
(b) Foreign	-	-	-
(c) Subtotal (1a+1b)	11,410,476	11,667,161	(256,685)
(d) Federal income tax on net capital (losses) gains	(206,982)	61,483	(268,465)
(e) Utilization of capital loss carryforwards	-	-	-
(f) Other	-	-	-
(g) Federal and foreign income taxes incurred	<u>\$ 11,203,494</u>	<u>\$ 11,728,644</u>	<u>\$ (525,150)</u>

(2–4) The tax effects of temporary differences that give rise to significant portions of the deferred tax assets and liabilities as of December 31, 2022 and 2021, are as follows:

	1	2	3
	2022	2021	(Col 1 - 2) Change
2 Deferred tax assets:			
(a) Ordinary:			
(1) Discounting of unpaid losses	\$ 334,725	\$ 237,642	\$ 97,083
(2) Unearned premium reserve	261,303	263,004	(1,701)
(3) Policyholder reserves	-	-	-
(4) Investments	-	-	-
(5) Deferred acquisition costs	-	-	-
(6) Policyholder dividends accrual	-	-	-
(7) Fixed assets	-	-	-
(8) Compensation and benefits accrual	-	-	-
(9) Pension accrual	-	-	-
(10) Receivables — nonadmitted	718,831	1,053,346	(334,515)
(11) Net operating loss carryforward	-	-	-
(12) Tax credit carryforward	-	-	-
(13) Other	<u>78,992</u>	<u>305</u>	<u>78,687</u>
(99) Subtotal (sum of 2a1 through 2a13)	1,393,851	1,554,297	(160,446)
(b) Statutory valuation allowance adjustment	-	-	-
(c) Nonadmitted	<u>-</u>	<u>-</u>	<u>-</u>
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	<u>1,393,851</u>	<u>1,554,297</u>	<u>(160,446)</u>
(e) Capital:			
(1) Investments	-	-	-
(2) Net capital loss carryforward	-	-	-
(3) Real estate	-	-	-
(4) Other	<u>-</u>	<u>-</u>	<u>-</u>
(99) Subtotal (2e1+2e2+2e3+2e4)	-	-	-
(f) Statutory valuation allowance adjustment	-	-	-
(g) Nonadmitted	<u>-</u>	<u>-</u>	<u>-</u>
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	<u>-</u>	<u>-</u>	<u>-</u>
(i) Admitted deferred tax assets (2d + 2h)	<u>1,393,851</u>	<u>1,554,297</u>	<u>(160,446)</u>
3 Deferred tax liabilities:			
(a) Ordinary:			
(1) Investments	-	-	-
(2) Fixed assets	-	-	-
(3) Deferred and uncollected premium	-	-	-
(4) Policyholder reserves	-	-	-
(5) Other	<u>111,607</u>	<u>121,504</u>	<u>(9,897)</u>
(99) Subtotal (3a1+3a2+3a3+3a4+3a5)	<u>111,607</u>	<u>121,504</u>	<u>(9,897)</u>
(b) Capital:			
(1) Investments	-	-	-
(2) Real estate	-	-	-
(3) Other	<u>-</u>	<u>-</u>	<u>-</u>
(99) Subtotal (3b1+3b2+3b3)	<u>-</u>	<u>-</u>	<u>-</u>
(c) Deferred tax liabilities (3a99 + 3b99)	<u>111,607</u>	<u>121,504</u>	<u>(9,897)</u>
4 Net deferred tax assets/liabilities (2i - 3c)	<u>\$ 1,282,244</u>	<u>\$ 1,432,793</u>	<u>\$ (150,549)</u>

The Company assessed the potential realization of the gross deferred tax asset and as a result no statutory valuation allowance was required and no allowance was established as of December 31, 2022 and 2021.

- D. The provision for federal income taxes incurred is different from that which would be obtained by applying the statutory federal income tax rate of 21% to net income before federal income taxes incurred, plus capital gains tax. A summarization of the significant items causing this difference as of December 31, 2022 and 2021 is as follows:

	2022		2021	
	Amount	Effective Tax Rate	Amount	Effective Tax Rate
Tax provision at the federal statutory rate	\$ 12,555,042	21%	\$ 13,068,897	21%
Tax-exempt interest	(44,897)	-	(40,593)	-
Current year tax credit	(1,499,622)	(3)	(1,547,029)	(2)
Tax effect of nonadmitted assets	334,503	1	(389,001)	(1)
Prior year true-up	9,017	-	50	-
Total statutory income taxes	<u>\$ 11,354,043</u>	<u>19%</u>	<u>\$ 11,092,324</u>	<u>18%</u>
Federal income taxes incurred	\$ 11,410,476	19%	\$ 11,667,161	19%
Capital gains tax	(206,982)	-	61,483	-
Change in net deferred income tax	<u>150,549</u>	<u>-</u>	<u>(636,320)</u>	<u>(1)</u>
Total statutory income taxes	<u>\$ 11,354,043</u>	<u>19%</u>	<u>\$ 11,092,324</u>	<u>18%</u>

- E. At December 31, 2022, the Company had no net operating loss carryforwards.

Current federal income taxes payable of \$2,970,188 and \$5,623,595 as of December 31, 2022 and 2021, respectively, are included in the financial statements. Federal income taxes paid, net of refunds were \$13,856,902 and \$2,437,565 in 2022 and 2021, respectively.

Federal income taxes incurred of \$11,184,188 and \$11,747,902 for 2022 and 2021, respectively, are available for recoupment in the event of future net losses.

The Company has not admitted any aggregate amounts of deposits that are included within Section 6603 (“Deposits made to suspend running of interest on potential underpayments, etc.”) of the Internal Revenue Service (“IRS”) Code.

- F. The Company is included in the consolidated federal income tax return with its ultimate parent, UnitedHealth Group. The entities included within the consolidated return are included in the NAIC Statutory Statement Schedule Y - Information Concerning Activities of Insurer Members Of A Holding Company Group. Federal income taxes are paid to or refunded by UnitedHealth Group pursuant to the terms of a tax-sharing agreement, approved by the Board of Directors, under which taxes approximate the amount that would have been computed on a separate company basis, with the exception of net operating losses and capital losses. For these losses the Company receives a benefit at the federal rate in the current year for current taxable losses incurred in that year to the extent losses can be utilized in the consolidated federal return of UnitedHealth Group. UnitedHealth Group currently files income tax returns in the U.S. federal jurisdiction, various states, and foreign jurisdictions. The U.S. IRS has completed exams on UnitedHealth Group’s consolidated income tax returns for fiscal years 2016 and prior. UnitedHealth Group’s 2017 through 2020 tax returns are under review by the IRS under its Compliance Assurance Program. With the exception of a few states, UnitedHealth Group is no longer subject to income tax examinations prior to the 2014 tax year. In general, the Company is subject to examination in non-U.S. jurisdictions for years 2015 and forward. The Company does not believe any adjustments that may result from these examinations will be material to the Company.

- G. **Tax Contingencies** — Not applicable.
- H. **Repatriation Transition Tax** — Not applicable.
- I. **Alternative Minimum Tax Credit** — Not applicable.

10. INFORMATION CONCERNING PARENT, SUBSIDIARIES, AND AFFILIATES

A–B. In the ordinary course of business, the Company contracts with several affiliates to provide a wide variety of services to the Company’s members. These agreements are filed with and approved by the Department according to Management’s understanding of the current requirements and standards. Within the confines of the applicable filed and approved agreements (including subsequent amendments thereto), the amount and types of services provided by these affiliated entities can change year over year.

The Company has a tax-sharing agreement with UnitedHealth Group (see Note 9).

The Company paid dividends of \$0 and \$65,000,000 in 2022 and 2021, respectively, to its parent (see Note 13).

The Company holds a subordinated revolving credit agreement with UnitedHealth Group at an interest rate of London InterBank Offered Rate plus a margin of 0.50%. This credit agreement is subordinate to the extent it does not conflict with any credit facility held by either party. The aggregate principal amount that may be outstanding at any time is the lesser of 3% of the Company’s admitted assets or 25% of the Company’s policyholder surplus as of the preceding December 31. The agreement was terminated effective December 31, 2022. Due to the elimination of LIBOR as an interest rate benchmark in 2023, this agreement will be modified in 2023. No amounts were outstanding under the line of credit as of December 31, 2022 and 2021. No interest was paid on all borrowings throughout the year as of December 31, 2022 and 2021, respectively.

The Company has entered into a reinsurance agreement with an affiliated entity (see Note 23).

C. Transactions With Related Parties Who Are Not Reported On Schedule Y

The Company has no material related party transactions that meet the disclosure requirements pursuant to SSAP No. 25, *Affiliates and Other Related Parties* (“SSAP No. 25”) that are not included in NAIC Statutory Statement Schedule Y—Part 2 Summary Of Insurer’s Transactions With Any Affiliates.

D. At December 31, 2022 and 2021, the Company reported \$3,954,810 and \$2,887,883, respectively, as amounts due to parent, subsidiaries, and affiliates, which are included in the financial statements. These balances are generally settled within 90 days from the incurred date. Any balances due to the Company that are not settled within 90 days are considered nonadmitted assets.

E. The administrative services, access fees, and cost of care services provided by affiliates are calculated using one or more of the following methods: (1) a percentage of premiums; (2) use of assets; (3) direct pass-through of charges; (4) per member per month (“PMPM”); (5) per employee per month; (6) per claim; or (7) a combination thereof consistent with the provisions contained in each contract. These amounts are included in GAE, CAE, and hospital and medical expenses in the financial statements. The following table identifies the amounts reported for the administrative services, access fees, and cost of care services provided by related parties for the years ended December 31, 2022 and 2021, which meet the disclosure requirements pursuant to SSAP No. 25, regardless of the effective date of the contract:

	2022	2021
OptumRx	\$ 309,151,454	\$ 262,719,576
UHS	101,501,929	97,254,155
United Behavioral Health	27,006,368	17,743,540
naviHealth, Inc.	9,882,411	4,223,434
OptumInsight, Inc.	3,333,174	3,115,590
XLHome Michigan, P.C.	2,791,129	1,285,029

OptumRx provides services that may include, but are not limited to, administrative services related to pharmacy management and pharmacy claims processing for enrollees, manufacturer rebate administration, pharmacy incentive services, specialty drug pharmacy services, durable medical equipment services including orthotics and prosthetics and personal health products catalogues showing the healthcare products and benefit credits enrollees needed to redeem the respective products.

UHS provides, or arranges for the provision of, management, administrative, and other services deemed necessary or appropriate for UHS to provide management and operational support to the Company. The services can include, but are not limited to, the categories of management and operational services outlined in the Agreement, such as human resources, legal, facilities, general administration, treasury and investment functions, claims adjudication and payment, benefit administration, disease management, health care decision support, medical management, credentialing, preventative health services, utilization management reporting and expenses incurred for new business that will be effective in the subsequent year.

United Behavioral Health provides services related to mental health and substance abuse treatment.

naviHealth, Inc. provides comprehensive post-acute services and care delivery.

OptumInsight, Inc. provides services that may include, but are not limited to, coordination of benefits and data mining, Retrospective Fraud and Waste Abuse, subrogation and audit services. All recoveries are returned to the Company by OptumInsight, Inc. on a monthly basis.

XLHome Michigan P.C. provides house call services to the Company's members.

- F.** The Company has not extended any guarantees or undertakings for the benefit of an affiliate or related party.
- G.** The Company is part of an insurance holding company system with UnitedHealth Group as the ultimate parent. Management believes that the Company's transactions with affiliates are fair and reasonable; however, operations of the Company may not be indicative of those that would have occurred if it had operated as an independent company.
- H.** The Company does not have any amount deducted from the value of an upstream intermediate entity or ultimate parent owned, either directly or indirectly, via a downstream subsidiary, controlled, or affiliated entity.
- I.** The Company does not have any investments in a subsidiary, controlled, or affiliated entity that exceeds 10% of admitted assets.
- J.** The Company does not have any investments in impaired subsidiaries, controlled, or affiliated entities.
- K.** The Company does not have any investments in foreign insurance subsidiaries.
- L.** The Company does not hold any investments in a downstream noninsurance holding company.
- M.** The Company does not have any investments in noninsurance subsidiaries, controlled, or affiliated entities.
- N.** The Company does not have any investments in insurance subsidiaries, controlled, or affiliated entities.
- O.** The Company does not have any investments in subsidiary, controlled, or affiliated entities or joint ventures, partnerships and limited liability companies in which the Company's share of losses exceeds the investment.

11. DEBT

- A–B.** The Company had no outstanding debt with third-parties or outstanding Federal Home Loan Bank agreements during 2022 and 2021.

12. RETIREMENT PLANS, DEFERRED COMPENSATION, POSTEMPLOYMENT BENEFITS AND COMPENSATED ABSENCES AND OTHER POSTRETIREMENT BENEFIT PLANS

- A–I.** The Company has no defined benefit plans, defined contribution plans, multiemployer plans, consolidated/holding company plans, postemployment benefits, or compensated absences plans and is not impacted by the Medicare Modernization Act on postretirement benefits, since all personnel are employees of UHS, which provides services to the Company under the terms of the Agreement (see Note 10).

13. CAPITAL AND SURPLUS, DIVIDEND RESTRICTIONS, AND QUASI-REORGANIZATIONS

- A–B.** The Company has 5,275,459 shares authorized and 2,303,598 shares issued and outstanding of common stock with no par value. The Company has no preferred stock outstanding. All issued and outstanding shares of common stock are held by the Company's parent, AmeriChoice.
- C.** Dividend payment requirements are outlined in the domiciliary state statutes and may be further restricted by the Department.
- D.** The Company paid no dividends in 2022. The Company paid ordinary cash dividends to AmeriChoice of \$20,000,000 on June 7, 2021, which was recorded as a reduction to unassigned surplus in the financial statements. The Company paid a cash dividend to AmeriChoice of \$45,000,000 on December 23, 2021, of which \$387,826 and \$44,612,174 was deemed to be an ordinary and extraordinary dividend, respectively. The extraordinary dividend was approved by the Department and recorded as a reduction to unassigned surplus in the financial statements.

- E. The amount of ordinary dividends that may be paid out during any given period is subject to certain restrictions as specified by state statute.
- F. There are no restrictions placed on the Company’s unassigned surplus.
- G. The Company is not a mutual reciprocal or a similarly organized entity and does not have advances to surplus not repaid.
- H. The Company does not hold any stock, including stock of affiliated companies for special purposes, such as conversion of preferred stock, employee stock options, or stock purchase warrants.
- I. The Company does not have any special surplus funds.
- J. The portion of unassigned surplus, excluding net income, and dividends, represented (or reduced) by each item below is as follows:

	2022	2021
Net deferred income taxes	\$ 1,282,244	\$ 1,432,793
Nonadmitted assets	<u>(3,423,236)</u>	<u>(5,016,109)</u>
Total	<u>\$ (2,140,992)</u>	<u>\$ (3,583,316)</u>

- K-M. The Company does not have any outstanding surplus notes and has never been a party to a quasi-reorganization.

14. LIABILITIES, CONTINGENCIES AND ASSESSMENTS

A. Contingent Commitments

The Company has no contingent commitments.

B. Assessments

The Company is not aware of any guaranty fund assessments or premium tax offsets, potential or accrued, that could have a material financial effect on the operations of the entity.

C. Gain Contingencies

The Company is not aware of any gain contingencies that should be disclosed in the financial statements.

D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits — Not applicable.

E. Joint and Several Liabilities — Not applicable.

F. All Other Contingencies

The Company’s business is regulated at the federal, state, and local levels. The laws and rules governing the Company’s business and interpretations of those laws and rules are subject to frequent change. Broad latitude is given to the agencies administering those regulations. Further, the Company must obtain and maintain regulatory approvals to market and sell many of its products.

The Company has been, or is currently involved, in various governmental investigations, audits and reviews. These include routine, regular and special investigations, audits and reviews by CMS, state insurance and health and welfare departments and other governmental authorities. The Company cannot reasonably estimate the range of loss, if any, that may result from any material government investigations, audits and reviews in which it is currently involved given the inherent difficulty in predicting regulatory action, fines and penalties, if any, and the various remedies and levels of judicial review available to the Company in the event of an adverse finding.

On February 14, 2017, the Department of Justice ("DOJ") announced its decision to pursue certain claims within a lawsuit initially asserted against the Company and filed under seal by a whistleblower in 2011. The whistleblower's complaint, which was unsealed on February 15, 2017, alleges that the Company made improper risk adjustment submissions and violated the False Claims Act. On February 12, 2018, the court granted in part and denied in part the Company's motion to dismiss. In May 2018, the DOJ moved to dismiss the Company's counterclaims, which were filed in March 2018, and moved for partial summary judgment. In March 2019, the court denied the government's motion for partial summary judgment and dismissed the Company's counterclaims without prejudice. The Company cannot reasonably estimate the outcome that may result from this matter given its procedural status.

Because of the nature of its businesses, the Company is frequently made party to a variety of legal actions and regulatory inquiries, including class actions and suits brought by members, care providers, consumer advocacy organizations, customers and regulators, relating to the Company's businesses, including management and administration of health benefit plans and other services.

The Company records liabilities for its estimates of probable costs resulting from these matters where appropriate. Estimates of costs resulting from legal and regulatory matters involving the Company are inherently difficult to predict, particularly where the matters involve: indeterminate claims for monetary damages or may involve fines, penalties or punitive damages; present novel legal theories or represent a shift in regulatory policy; involve a large number of claimants or regulatory bodies; are in the early stages of the proceedings; or could result in a change in business practices. Accordingly, the Company is often unable to estimate the losses or ranges of losses for those matters where there is a reasonable possibility, or it is probable that a loss may be incurred. Although the outcomes of any such legal actions cannot be predicted, in the opinion of management, the resolution of any currently pending or threatened actions will not have a material adverse effect on the financial statements of the Company.

The Company routinely evaluates the collectability of all receivable amounts included in the financial statements. Impairment reserves are established for those amounts where collectability is uncertain. Based on the Company's past experience, exposure related to uncollectible balances and the potential of loss for those balances not currently reserved for is not material to the Company's statutory basis financial condition.

There are no assets that the Company considers to be significantly impaired at December 31, 2022 and 2021.

15. LEASES

A–B. According to the Agreement between the Company and UHS (see Note 10), operating leases for the rental of office facilities and equipment are the responsibility of UHS. Fees associated with the lease agreements are included as a component of the Company's management fee.

16. INFORMATION ABOUT FINANCIAL INSTRUMENTS WITH OFF-BALANCE-SHEET RISK AND FINANCIAL INSTRUMENTS WITH CONCENTRATIONS OF CREDIT RISK

(1–4) The Company does not hold any financial instruments with off-balance-sheet risk or have any concentrations of credit risk.

17. SALE, TRANSFER, AND SERVICING OF FINANCIAL ASSETS AND EXTINGUISHMENTS OF LIABILITIES

A–C. The Company did not participate in any transfer of receivables, financial assets or wash sales.

18. GAIN OR LOSS TO THE REPORTING ENTITY FROM UNINSURED PLANS AND THE UNINSURED PORTION OF PARTIALLY INSURED PLANS

A. Administrative Services Only (“ASO”) Plans

MDHHS utilizes managed care organizations (“MCO”) to pay the funds to providers participating in the MDHHS provider programs. As an MCO, the Company receives provider program funds and disbursement requirements from MDHHS. As of December 31, 2022 and 2021, the Company recorded a payable related to the MDHHS provider programs of \$78,054 and \$81,655, respectively, in liability for amounts held under uninsured plans in the statutory basis statements of admitted assets, liabilities, and capital and surplus.

The net gain from operations of the ASO uninsured plans and the uninsured portion of partially insured plans are as follows:

	2022			2021		
	ASO Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASO	ASO Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASO
a. Net reimbursement for administrative expenses (including administrative fees) in excess of actual expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
b. Total net other income or expenses (including interest paid to or received from plans)	606,626	-	606,626	314,459	-	314,459
c. Net gain (loss) from operations	606,626	-	606,626	314,459	-	314,459
d. Total claim payment volume	359,319,852	-	359,319,852	340,137,469	-	340,137,469

B. The Company has no operations from Administrative Services Contracts.

C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract

The Medicare Part D program is a partially insured plan. The Company recorded a payable of \$7,916,506 and \$6,222,519 at December 31, 2022 and 2021, respectively, for cost reimbursement under the Medicare Part D program for the catastrophic reinsurance and low-income member cost-sharing subsidies. The Company also recorded a receivable of \$108,625 and \$78,139 at December 31, 2022 and 2021, respectively, for the Medicare Part D coverage gap discount program. The receivables and payables are recorded in amounts receivable relating to uninsured plans and liability for amounts held under uninsured plans, respectively, in the financial statements.

19. DIRECT PREMIUM WRITTEN/PRODUCED BY MANAGING GENERAL AGENTS/THIRD-PARTY ADMINISTRATORS

The Company did not have any direct premiums written or produced by managing general agents or third-party administrators in 2022 and 2021.

20. FAIR VALUE MEASUREMENTS

The NAIC SAP defines fair value, establishes a framework for measuring fair value, and outlines the disclosure requirements related to fair value measurements. The fair value hierarchy is as follows:

Level 1 — Quoted (unadjusted) prices for identical assets in active markets.

Level 2 — Other observable inputs, either directly or indirectly, including:

- Quoted prices for similar assets in active markets;
- Quoted prices for identical or similar assets in nonactive markets (few transactions, limited information, noncurrent prices, high variability over time, etc.);
- Inputs other than quoted prices that are observable for the asset (interest rates, yield curves, volatilities, default rates, etc.);
- Inputs that are derived principally from or corroborated by other observable market data.

Level 3 — Unobservable inputs that cannot be corroborated by observable market data.

The estimated fair values of bonds, cash equivalents, short-term investments (collectively “investment holdings”) are based on quoted market prices, where available. The Company obtains one price for each security primarily from a third-party pricing service (“pricing service”), which generally uses quoted prices or other observable inputs for the determination of fair value. The pricing service normally derives the security prices through recently reported trades for identical or similar securities, making adjustments through the reporting date based upon available observable market information. For securities not actively traded, the pricing service may use quoted market prices of comparable instruments or discounted cash flow analyses, incorporating inputs that are currently observable in the markets for similar securities. Inputs that are often used in the valuation methodologies include, but are not limited to, non-binding broker quotes, benchmark yields, credit spreads, default rates, and prepayment speeds. As the Company is responsible for the determination of fair value, it performs quarterly analyses on the prices received from the pricing service to determine whether the prices are reasonable estimates of fair value. Specifically, the Company compares the prices received from the pricing service to a secondary pricing source, prices reported by its custodian, its investment consultant, and third-party investment advisors. Additionally, the Company compares changes in the reported market values and returns to relevant market indices to test the reasonableness of the reported prices. The Company’s internal price verification procedures and review of fair value methodology documentation provided by independent pricing services have not historically resulted in an adjustment in the prices obtained from the pricing service.

In instances in which the inputs used to measure fair value fall into different levels of the fair value hierarchy, the fair value measurement has been determined based on the lowest-level input that is significant to the fair value measurement in its entirety. The Company’s assessment of the significance of a particular item to the fair value measurement in its entirety requires judgment, including the consideration of inputs specific to the asset or liability.

A. Fair Value

(1) Fair Value Measurements at Reporting Date

The following tables present information about the Company's financial assets that are measured and reported at fair value at December 31, 2022 and 2021, in the financial statements according to the valuation techniques the Company used to determine their fair values:

Description for Each Class of Asset or Liability	December 31, 2022				Total
	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	
a. Assets at fair value:					
Perpetual preferred stock:					
Industrial and misc	\$ -	\$ -	\$ -	\$ -	\$ -
Parent, subsidiaries, and affiliates	-	-	-	-	-
Total perpetual preferred stocks	-	-	-	-	-
Bonds:					
U.S. governments	-	-	-	-	-
Industrial and misc	-	-	-	-	-
Hybrid securities	-	-	-	-	-
Parent, subsidiaries, and affiliates	-	-	-	-	-
Total bonds	-	-	-	-	-
Common stock:					
Industrial and misc	-	-	-	-	-
Parent, subsidiaries, and affiliates	-	-	-	-	-
Total common stocks	-	-	-	-	-
Derivative assets:					
Interest rate contracts	-	-	-	-	-
Foreign exchange contracts	-	-	-	-	-
Credit contracts	-	-	-	-	-
Commodity futures contracts	-	-	-	-	-
Commodity forward contracts	-	-	-	-	-
Total derivatives	-	-	-	-	-
Money-market funds	143,183,118	-	-	-	143,183,118
Qualified cash pool	-	-	-	-	-
Separate account assets	-	-	-	-	-
Total assets at fair value/NAV	\$ 143,183,118	\$ -	\$ -	\$ -	\$ 143,183,118
b. Liabilities at fair value:					
Derivative liabilities	\$ -	\$ -	\$ -	\$ -	\$ -
Total liabilities at fair value	\$ -	\$ -	\$ -	\$ -	\$ -

Description for Each Class of Asset or Liability	December 31, 2021				Total
	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	
a. Assets at fair value:					
Perpetual preferred stock:					
Industrial and misc	\$ -	\$ -	\$ -	\$ -	\$ -
Parent, subsidiaries, and affiliates	-	-	-	-	-
Total perpetual preferred stocks	-	-	-	-	-
Bonds:					
U.S. governments	-	-	-	-	-
Industrial and misc	-	-	-	-	-
Hybrid securities	-	-	-	-	-
Parent, subsidiaries, and affiliates	-	-	-	-	-
Total bonds	-	-	-	-	-
Common stock:					
Industrial and misc	-	-	-	-	-
Parent, subsidiaries, and affiliates	-	-	-	-	-
Total common stocks	-	-	-	-	-
Derivative assets:					
Interest rate contracts	-	-	-	-	-
Foreign exchange contracts	-	-	-	-	-
Credit contracts	-	-	-	-	-
Commodity futures contracts	-	-	-	-	-
Commodity forward contracts	-	-	-	-	-
Total derivatives	-	-	-	-	-
Money-market funds	180,852,587	-	-	-	180,852,587
Qualified cash pool	-	-	-	-	-
Separate account assets	-	-	-	-	-
Total assets at fair value/NAV	\$ 180,852,587	\$ -	\$ -	\$ -	\$ 180,852,587
b. Liabilities at fair value:					
Derivative liabilities	\$ -	\$ -	\$ -	\$ -	\$ -
Total liabilities at fair value	\$ -	\$ -	\$ -	\$ -	\$ -

(2) The Company does not have any financial assets with a fair value hierarchy of Level 3 that were measured and reported at fair value.

The Company considers its investments in LIHTC investments as a Level 3 investment even though no market valuation was required as of December 31, 2022 and 2021. As a result, these investments are excluded from being presented as a Level 3 security in the fair value hierarchy tables above. As there is no readily available market, these securities are recorded at book/adjusted carrying value and considered held to maturity as they will not be sold. As a result, these investments are recorded and reported at book value of \$8,987,012 and \$10,408,592 as of December 31, 2022 and 2021.

(3) Transfers between fair value hierarchy levels, if any, are recorded as of the beginning of the reporting period in which the transfer occurs. There were no transfers between Levels 1, 2 or 3 of any financial assets or liabilities during the years ended December 31, 2022 or 2021.

- (4) The framework the Company has established for determining the fair value of the investment holdings is outlined above.

LIHTC Investments —The Company does consider its investments in LIHTC investments as a Level 3 investment even though no market valuation adjustment was required as of December 31, 2022 and 2021. As a result, these investments are excluded from being presented as a level 3 security in the financial hierarchy tables above. As there is no readily available market, these securities are recorded and reported at book/adjusted carrying value and considered held to maturity as they will not be sold. Should any contractual breakage occur that jeopardizes the ability to receive the tax credits associated with these securities, impairments will be recognized. As of December 31, 2022, all of these investments are performing in accordance with their original contract terms.

- (5) The Company has no derivative assets and liabilities to disclose.

B. Fair Value Combination — Not applicable.

C. Aggregate Fair Value Hierarchy

The aggregate fair value by hierarchy of all financial instruments as of December 31, 2022 and 2021 is presented in the table below:

Type of Financial Instrument	December 31, 2022						Not Practicable (Carrying Value)
	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	
U.S. government and agency securities	\$ 57,407,731	\$ 60,363,275	\$ 46,572,674	\$ 10,835,057	\$ -	\$ -	\$ -
State and agency municipal securities	6,393,525	6,496,253	-	6,393,525	-	-	-
City and county municipal securities	4,386,496	4,687,265	-	4,386,496	-	-	-
Corporate debt securities	73,285,936	75,945,499	-	73,285,936	-	-	-
Cash equivalents	146,777,576	146,777,576	143,183,118	3,594,458	-	-	-
Other invested assets	<u>8,987,012</u>	<u>8,987,012</u>	<u>-</u>	<u>-</u>	<u>8,987,012</u>	<u>-</u>	<u>-</u>
Total bonds, short-term investments, cash equivalents, and other invested assets	<u>\$ 297,238,276</u>	<u>\$ 303,256,880</u>	<u>\$ 189,755,792</u>	<u>\$ 98,495,472</u>	<u>\$ 8,987,012</u>	<u>\$ -</u>	<u>\$ -</u>

Type of Financial Instrument	December 31, 2021						Not Practicable (Carrying Value)
	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	
U.S. government and agency securities	\$ 56,612,801	\$ 56,815,005	\$ 49,221,284	\$ 7,391,517	\$ -	\$ -	\$ -
State and agency municipal securities	5,420,864	5,110,379	-	5,420,864	-	-	-
City and county municipal securities	5,930,012	5,707,652	-	5,930,012	-	-	-
Corporate debt securities	83,252,100	82,669,815	-	83,252,100	-	-	-
Cash equivalents	181,958,691	181,958,691	180,852,587	1,106,104	-	-	-
Other invested assets	<u>10,408,592</u>	<u>10,408,592</u>	<u>-</u>	<u>-</u>	<u>10,408,592</u>	<u>-</u>	<u>-</u>
Total bonds, short-term investments, cash equivalents, and other invested assets	<u>\$ 343,583,060</u>	<u>\$ 342,670,134</u>	<u>\$ 230,073,871</u>	<u>\$ 103,100,597</u>	<u>\$ 10,408,592</u>	<u>\$ -</u>	<u>\$ -</u>

D. Not Practicable to Estimate Fair Value — Not applicable.

E. Investments Measured Using the NAV Practical Expedient — Not applicable.

21. OTHER ITEMS

A. Unusual or Infrequent Items

The Company did not encounter any unusual or infrequent items for the years ended December 31, 2022 and 2021.

B. Troubled Debt Restructuring: Debtors

The Company has no troubled debt restructurings as of December 31, 2022 and 2021.

C. Other Disclosures

The Company does not have any amounts not recorded in the financial statements that represent segregated funds held for others. The Company also does not have any exposures related to forward commitments that are not derivative instruments.

D. Business Interruption Insurance Recoveries

The Company has not received any business interruption insurance recoveries during 2022 and 2021.

E. State Transferable and Non-transferable Tax Credits

The Company has no transferable or non-transferable state tax credits.

F. Sub-Prime Mortgage-Related Risk Exposure

- (1) The investment policy for the Company limits investments in loan backed securities, which includes subprime issuers. Further, the policy limits investments in private issuer mortgage securities to 10% of the portfolio, which also includes subprime issuers. The exposure to unrealized losses on subprime issuers is due to changes in market prices. There are no realized losses due to not receiving anticipated cash flows. The investments covered have an NAIC designation of 1 and/or 2.
- (2) The Company has no direct exposure through investments in sub-prime mortgage loans.
- (3) The Company has no direct exposure through other investments.
- (4) The Company has no underwriting exposure to sub-prime mortgage risk through mortgage guaranty or financial guaranty insurance coverage.

G. Retained Assets

The Company does not have any retained asset accounts for beneficiaries.

H. Insurance-Linked Securities Contracts

As of December 31, 2022, the Company is not aware of any possible proceeds of insurance-linked securities.

I. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy — Not applicable.

22. EVENTS SUBSEQUENT

Subsequent events have been evaluated through March 1, 2023, which is the date these financial statements were available for issuance.

TYPE I — Recognized Subsequent Events

Any material Type I events subsequent to December 31, 2022, have been recognized in the financial statements and corresponding disclosures.

TYPE II — Non-Recognized Subsequent Events

There are no material non-recognized Type II events that require disclosure.

23. REINSURANCE

Reinsurance Agreements — In the normal course of business, the Company seeks to reduce potential losses that may arise from catastrophic events that cause unfavorable underwriting results by reinsuring certain levels of such risk with affiliated reinsurers. The Company remains primarily liable as the direct insurer on all risks reinsured.

The Company has a reinsurance agreement with an affiliated entity, UnitedHealthcare Insurance Company ("UHIC") to cover certain inpatient hospital claims in excess of defined limits. Reinsurance premiums, which are calculated on a PMPM basis, of \$9,958,987 and \$9,612,812 in 2022 and 2021 respectively, are netted against net premium income in the financial statements. Reinsurance recoveries of \$7,307,260 and \$3,912,574 in 2022 and 2021 respectively, are included in net reinsurance recoveries in the financial statements. There were \$4,252,059 and \$4,204,871 for estimated recoveries on unpaid losses which are recorded as a reduction to claims unpaid in 2022 and 2021, respectively, in the financial statements. Reinsurance contracts do not relieve the Company from its obligations to policyholders. Failure of reinsurers to honor their obligations could result in losses to the Company.

The Company does not have any unaffiliated reinsurance agreements in place as of December 31, 2022 or 2021.

The effect of both internal reinsurance agreements outlined above on net premium income, hospital and medical expenses is presented below:

	2022	2021
Premiums:		
Direct	\$ 1,390,823,393	\$ 1,315,704,807
Ceded:		
Affiliate	<u>9,958,987</u>	<u>9,612,812</u>
Net premium income	<u>\$ 1,380,864,406</u>	<u>\$ 1,306,091,995</u>
Hospital and medical expenses:		
Direct	\$ 1,221,459,904	\$ 980,690,037
Ceded:		
Affiliate	<u>7,307,260</u>	<u>3,912,574</u>
Net hospital and medical expenses	<u>\$ 1,214,152,644</u>	<u>\$ 976,777,463</u>

The Company recognized reinsurance recoveries related to internal reinsurance agreements of \$7,307,260 and \$3,912,574 in 2022 and 2021, respectively, which are recorded as net reinsurance recoveries in the financial statements. In addition, reinsurance recoverables related to internal reinsurance agreements of \$4,252,059 and \$4,204,871 for unpaid losses are recorded as a reduction to claims unpaid in 2022 and 2021, respectively, in the financial statements. There were no amounts recoverable from reinsurers for paid losses as of December 31, 2022 and 2021, respectively.

A. Ceded Reinsurance Report

Section 1 — General Interrogatories

- (1) Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the Company or by any representative, officer, trustee, or director of the Company?

Yes () No (X)
- (2) Have any policies issued by the Company been reinsured with a company chartered in a country other than the United States (excluding U.S. branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor, or any other person not primarily engaged in the insurance business?

Yes () No (X)

Section 2 — Ceded Reinsurance Report — Part A

- (1) Does the Company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credit?

Yes () No (X)
- (2) Does the reporting entity have any reinsurance agreements in effect that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?

Yes () No (X)

Section 3 — Ceded Reinsurance Report — Part B

- (1) What is the estimated amount of the aggregate reduction in surplus (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of all reinsurance agreements, by either party, as of the date of this statement? Where necessary, the Company may consider the current or anticipated experience of the business reinsured in making this estimate.

The Company estimates there should be no aggregate reduction in surplus for termination of all reinsurance agreements as of December 31, 2022.

- (2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the Company as of the effective date of the agreement?

Yes () No (X)

B. Uncollectible Reinsurance — During 2022 and 2021, there were no uncollectible reinsurance recoverables.

C. Commutation of Ceded Reinsurance — There was no commutation of reinsurance in 2022 or 2021.

D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation — Not applicable.

E. Reinsurance Credit

- (1) The Company has no ceding reinsurance contracts subject to Appendix A-791 – *Life and Health Reinsurance Agreements* (“A-791”) that includes a provision which limits the reinsurer’s assumption of significant risk.
- (2) The Company has no ceding reinsurance contracts not subject to A-791, for which reinsurance accounting was applied and which include a provision that limits the reinsurer’s assumption of risk.
- (3) The Company’s reinsurance contracts do not contain features which result in delays in payment in form or in fact.
- (4) The Company has not reflected a reinsurance accounting credit for any assumption reinsurance contracts not subject to Appendix A-791 and not yearly renewable term, which meet the risk transfer requirements of SSAP No. 61R, *Life, Deposit-Type, and Accident and Health Reinsurance* (“SSAP No. 61R”).
- (5) The Company did not cede any risk which is not subject to A-791 and not yearly renewable term reinsurance, under any reinsurance contract during the period covered by these financial statements, for which the statutory accounting treatment and GAAP accounting treatment were not the same.
- (6) The Company’s ceded reinsurance contract which is not subject to A-791 and not yearly renewable term reinsurance, is treated the same for GAAP and statutory accounting principles.

24. RETROSPECTIVELY RATED CONTRACTS AND CONTRACTS SUBJECT TO REDETERMINATION

- A.** The Company estimates accrued retrospective premium adjustments for its group health insurance business based on mathematical calculations in accordance with contractual terms.
- B.** Estimated accrued retrospective premiums due to (from) the Company are recorded in premiums and considerations and aggregate health policy reserves in the financial statements and as an adjustment to change in unearned premium reserves and reserve for rate credits in the financial statements.
- C.** Pursuant to the ACA, the Company’s commercial and Medicare business is subject to retrospectively rated features based on the actual MLR experienced on the commercial and Medicare lines of business and redetermination features for premium adjustments for changes to each member’s health scores based on guidelines determined by the ACA. The total amount of direct premiums written for the commercial and Medicare lines of business for which a portion is subject to the retrospectively rated and redetermination features are \$15,371,785 and \$8,785,966 and \$304,017,884 and \$173,260,016, representing 1% and 1%, and 22% and 13% of total direct premiums written as of December 31, 2022 and December 31, 2021, respectively.

The Company has Medicare Part D risk-corridor amounts from CMS which are subject to a retrospectively rated feature. The Company has estimated accrued retrospective premiums related to certain Part D premiums based on guidelines determined by CMS. The formula is tiered and based on the bid MLR. The amount of Medicare Part D direct premiums written subject to the retrospectively rated feature was \$14,211,997 and \$8,592,801, representing 1% and 1% of total direct premiums written as of December 31, 2022 and December 31, 2021, respectively.

CMS has released the final Medicaid Managed Care Rule which is subject to each State’s administration elections. This rule is the first major update to the Medicaid Managed Care regulations in more than a decade, which includes a minimum loss ratio requirement. Pursuant to the regulations, premiums associated with the Company’s Medicaid line of business is subject to retrospectively rated features based on the actual MLR experienced on this product. The calculation is pursuant to the Medicaid Managed Care guidance. The Company also has recorded risk-corridor amounts from the State Medicaid agency which are subject to retrospectively rate features. The Company has estimated accrued retrospective premium adjustments based on the risk-corridor tier guidelines included in the contract. In addition, the Company’s Medicaid contract with the State of Michigan, is subject to redetermination features for which a portion of total direct premiums written is at risk and can be returned to the Company based on various utilization measures, and for which a stated percentage of the total direct premiums written can be eligible for a performance guarantee payment based on various quality measures, and for which a portion of direct premiums written is subject to risk adjusted rating changes and withhold adjustments. The total amount of direct premiums written for the Medicaid line of business for which a portion is subject to the retrospectively rated and redetermination features was \$1,071,433,724 and \$1,133,658,825, representing 77% and 86% of total direct premiums written as of December 31, 2022 and December 31, 2021, respectively.

- D. The Company is required to maintain specific minimum loss ratio on the comprehensive commercial and Medicare lines of business.

The following table discloses the minimum MLR rebate liability for the comprehensive commercial and Medicare lines of business which is included in aggregate health policy reserves in the financial statements for the years ended December 31, 2022 and 2021:

	1	2	3	4	5
	Individual	Small Group Employer	Large Group Employer	Other Categories with Rebates	Total
Prior reporting year					
(1) Medical loss ratio rebates incurred	\$ -	\$ -	\$ -	\$ (1,521,239)	\$ (1,521,239)
(2) Medical loss ratio rebates paid	-	-	-	-	-
(3) Medical loss rebates unpaid	-	-	-	4,582,261	4,582,261
(4) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	-
(5) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	-
(6) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	4,582,261
Current reporting year-to-date					
(7) Medical loss ratio rebates incurred	-	-	-	4,544,513	4,544,513
(8) Medical loss ratio rebates paid	-	-	-	3,459,105	3,459,105
(9) Medical loss rebates unpaid	-	-	-	5,667,669	5,667,669
(10) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	-
(11) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	-
(12) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	5,667,669

Pursuant to the Medicaid Managed Care Rule, based on the State’s election, the Company is required to maintain specific MLRs on its Healthy Michigan and Healthy Michigan populations. The Company has no amounts accrued for Medicaid MLR rebates as of December 31, 2022 and December 31, 2021, respectively.

E. Risk-Sharing Provisions of the Affordable Care Act

- (1) The Company has accident and health insurance premiums in 2022 and 2021 subject to the risk-sharing provisions of the ACA.

The ACA imposed fees and premium stabilization provisions on health insurance issuers offering comprehensive commercial health insurance. The three premium stabilization programs are commonly referred to as the 3Rs — risk adjustment, reinsurance, and risk corridors.

Risk Adjustment — The risk adjustment program is a permanent program designed to mitigate the potential impact of adverse selection that generally applies to non-grandfathered individual and small group plans inside and outside of exchanges. The program helps to stabilize market premiums by transferring funds from plans with relatively low-risk enrollees to plans with relatively high-risk enrollees. The data used by CMS to determine the risk adjustment transfer amount is subject to audits along with the true-up to the final CMS report, which may result in a material change to arrive at the final risk adjustment amount from the initial risk adjustment estimate recorded. Premium adjustments pursuant to the risk adjustment program are accounted for as premium subject to redetermination and user fees are accounted for as assessments.

Reinsurance and Risk Corridors — The transitional reinsurance program and risk corridors program were temporary programs which expired at the end of 2016. The Company received \$144,054 from CMS for the settlement of the temporary ACA risk corridor program which has been reflected in net premium income in the financial statements. The details of the years impacted and the amounts received are included in Note 24E 4 and Note 24E 5 below.

(2) The following table presents the current year impact of risk-sharing provisions of the ACA on assets, liabilities, and operations:

a. Permanent ACA Risk Adjustment Program		December 31, 2022
<u>Assets</u>		
1. Premium adjustments receivable due to ACA Risk Adjustment (including high-risk pool payments)	\$	21,667
<u>Liabilities</u>		
2. Risk adjustment user fees payable for ACA Risk Adjustment		11,720
3. Premium adjustments payable due to ACA Risk Adjustment (including high-risk pool premium)		5,219,072
<u>Operations (Revenue & Expense)</u>		
4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment		(5,162,220)
5. Reported in expenses as ACA Risk Adjustment user fees (incurred/paid)		341,430
b. Transitional ACA Reinsurance Program		
<u>Assets</u>		
1. Amounts recoverable for claims paid due to ACA Reinsurance	\$	-
2. Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability)		-
3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance		-
<u>Liabilities</u>		
4. Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premium		-
5. Ceded reinsurance premiums payable due to ACA Reinsurance		-
6. Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance		-
<u>Operations (Revenue & Expense)</u>		
7. Ceded reinsurance premiums due to ACA Reinsurance		-
8. Reinsurance recoveries (income statement) due to ACA reinsurance payments or expected payments		-
9. ACA Reinsurance contributions - not reported as ceded premium		-
c. Temporary ACA Risk Corridors Program		
<u>Assets</u>		
1. Accrued retrospective premium due to ACA Risk Corridors	\$	-
<u>Liabilities</u>		
2. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors		-
<u>Operations (Revenue & Expense)</u>		
3. Effect of ACA Risk Corridors on net premium income (paid/received)		-
4. Effect of ACA Risk Corridors on change in reserves for rate credits		-

(3) The following table is a rollforward of the prior year ACA risk-sharing provisions for asset and liability balances, along with reasons for adjustments to prior year balances:

	Accrued During the Prior Year on Business Written before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written before December 31 of the Prior Year		Differences		Adjustments		Ref	Unsettled Balances as of the Reporting Date	
					Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1 - 3 + 7)	Cumulative Balance from Prior Years (Col 2 - 4 + 8)
	1	2	3	4	5	6	7	8		9	10
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)		Receivable	(Payable)
a. Permanent ACA Risk Adjustment Program											
1. Premium adjustment receivable (including high-risk pool payments)	\$ 22,835	\$ -	\$ 442	\$ -	\$ 22,393	\$ -	\$ (17,899)	\$ -	A	\$ 4,494	\$ -
2. Premium adjustment (payable) (including high-risk pool premium)	-	(1,227,374)	-	(1,169,897)	-	(57,477)	-	57,477	B	-	-
3. Subtotal ACA Permanent Risk Adjustment Program	22,835	(1,227,374)	442	(1,169,897)	22,393	(57,477)	(17,899)	57,477		4,494	-
b. Transitional ACA Reinsurance Program											
1. Amounts recoverable for claims paid	-	-	-	-	-	-	-	-	C	-	-
2. Amounts recoverable for claims unpaid (contra liability)	-	-	-	-	-	-	-	-	D	-	-
3. Amounts receivable relating to uninsured plans	-	-	-	-	-	-	-	-	E	-	-
4. Liabilities for contributions payable due to ACA Reinsurance—not reported as ceded premium	-	-	-	-	-	-	-	-	F	-	-
5. Ceded reinsurance premiums payable	-	-	-	-	-	-	-	-	G	-	-
6. Liability for amounts held under uninsured plans	-	-	-	-	-	-	-	-	H	-	-
7. Subtotal ACA Transitional Reinsurance Program	-	-	-	-	-	-	-	-		-	-
c. Temporary ACA Risk Corridors Program											
1. Accrued retrospective premium	-	-	-	-	-	-	-	-	I	-	-
2. Reserve for rate credits or policy experience rating refunds	-	-	-	-	-	-	-	-	J	-	-
3. Subtotal ACA Risk Corridors Program	-	-	-	-	-	-	-	-		-	-
d. Total for ACA Risk-Sharing Provisions	\$ 22,835	\$ (1,227,374)	\$ 442	\$ (1,169,897)	\$ 22,393	\$ (57,477)	\$ (17,899)	\$ 57,477		\$ 4,494	\$ -

Explanation of Adjustments

- A. The risk adjustment receivable as of December 31, 2021 utilized paid claims through October 31, 2021. As of the Reporting Date, the risk adjustment receivable related to prior periods was adjusted based on CMS' Summary Report on Permanent Risk Adjustment Transfers for the 2021 Benefit Year as revised on July 19, 2022. The risk adjustment receivable was further adjusted based on CMS' Final Rule amending Risk Adjustment Data Validation beginning with the 2019 Benefit Year, and Benefit Years 2019 and 2020 Risk Adjustment Data Validation IVA results, as well as CMS' Updated Summary Report of 2018 Benefit Year Risk Adjustment Data Validation Adjustments to Risk Adjustment Transfers published January 20, 2022 and CMS' Reissued 2019 Benefit year Department of Health and Human Services Risk Adjustment Data Validation (HHS-RADV) Results and 2020 Benefit Year HHS-RADV Results published September 15, 2022.
- B. The risk adjustment payable as of December 31, 2021 utilized paid claims through October 31, 2021. As of the Reporting Date, the risk adjustment payable related to prior periods was adjusted based on CMS' Summary Report on Permanent Risk Adjustment Transfers for the 2021 Benefit Year as revised on July 19, 2022. The risk adjustment payable was further adjusted based on CMS' Final Rule amending Risk Adjustment Data Validation beginning with the 2019 Benefit Year, and Benefit Years 2019 and 2020 Risk Adjustment Data Validation IVA results, as well as CMS' Updated Summary Report of 2018 Benefit Year Risk Adjustment Data Validation Adjustments to Risk Adjustment Transfers published January 20, 2022 and CMS' Reissued 2019 Benefit year Department of Health and Human Services Risk Adjustment Data Validation (HHS-RADV) Results and 2020 Benefit Year HHS-RADV Results published September 15, 2022.
- C. N/A
- D. N/A
- E. N/A
- F. N/A
- G. N/A
- H. N/A
- I. N/A
- J. N/A

(4) The Company does not have any risk corridor receivables or payables to present in the table below.

Risk Corridors Program Year:	Accrued During the Prior Year on Business Written Before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments		Unsettled Balances as of the Reporting Date		
					Prior Year Accrued Less Payments (Col 1–3)	Prior Year Accrued Less Payments (Col 2–4)	To Prior Year Balances	To Prior Year Balances	Cumulative Balance from Prior Years (Col 1–3+7)	Cumulative Balance from Prior Years (Col 2–4+8)	
	1	2	3	4	5	6	7	8	9	10	
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a. 2014											
1. Accrued retrospective premium	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	A	\$ -	\$ -
2. Reserve for rate credits or policy experience rating refunds	-	-	-	-	-	-	-	-	B	-	-
b. 2015											
1. Accrued retrospective premium	-	-	-	-	-	-	-	-	C	-	-
2. Reserve for rate credits or policy experience rating refunds	-	-	-	-	-	-	-	-	D	-	-
c. 2016											
1. Accrued retrospective premium	-	-	-	-	-	-	-	-	E	-	-
2. Reserve for rate credits or policy experience rating refunds	-	-	-	-	-	-	-	-	F	-	-
d. Total for Risk Corridors	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	\$ -
<u>Explanation of Adjustments</u>											
A.											
B.											
C.											
D.											
E.											
F.											

(5) The following table discloses ACA risk corridor receivable balances by risk corridor program year:

Risk Corridors Program Year:	1	2	3	4	5	6
	Estimated Amount to be Filed or Final Amount Filed with CMS	Non-Accrued Amounts for Impairment or Other Reasons	Amounts received from CMS	Asset Balance (Gross of Non-admissions) (1-2-3)	Non-admitted Amount	Net Admitted Asset (4-5)
a. 2014	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
b. 2015	144,054	-	144,054	-	-	-
c. 2016	-	-	-	-	-	-
d. Total (a+b+c)	\$ 144,054	\$ -	\$ 144,054	\$ -	\$ -	\$ -

25. CHANGE IN INCURRED CLAIMS AND CLAIMS ADJUSTMENT EXPENSES

A. Changes in estimates related to the prior year incurred claims are included in total hospital and medical expenses in the current year in the financial statements. The following tables disclose paid claims, incurred claims, and the balance in claims unpaid, accrued medical incentive pool and bonus amounts, aggregate health claim reserves, health care and other amounts receivable and reinsurance recoverables for the years ended December 31, 2022 and 2021:

	2022		
	Current Year Incurred Claims	Prior Years Incurred Claims	Total
Beginning of year claim reserve	\$ -	\$ (83,530,985)	\$ (83,530,985)
Paid claims—net of health care receivables and reinsurance recoveries collected	1,108,191,777	74,452,514	1,182,644,291
End of year claim reserve	<u>112,568,983</u>	<u>7,269,324</u>	<u>119,838,307</u>
Incurred claims excluding the change in health care receivables and reinsurance recoverables as presented below	1,220,760,760	(1,809,147)	1,218,951,613
Beginning of year health care receivables	-	20,937,578	20,937,578
End of year health care receivables	<u>(25,003,251)</u>	<u>(733,296)</u>	<u>(25,736,547)</u>
Total incurred claims	<u>\$ 1,195,757,509</u>	<u>\$ 18,395,135</u>	<u>\$ 1,214,152,644</u>

	2021		
	Current Year Incurred Claims	Prior Years Incurred Claims	Total
Beginning of year claim reserve	\$ -	\$ (88,654,724)	\$ (88,654,724)
Paid claims—net of health care receivables	929,124,251	59,731,691	988,855,942
End of year claim reserve	<u>77,106,385</u>	<u>6,424,600</u>	<u>83,530,985</u>
Incurred claims excluding the change in health care receivables recoverables as presented below	1,006,230,636	(22,498,433)	983,732,203
Beginning of year health care receivables	-	13,982,838	13,982,838
End of year health care receivables	<u>(20,045,976)</u>	<u>(891,602)</u>	<u>(20,937,578)</u>
Total incurred claims	<u>\$ 986,184,660</u>	<u>\$ (9,407,197)</u>	<u>\$ 976,777,463</u>

The liability for claims unpaid, accrued medical incentive pool and bonus amounts, and aggregate health claim reserves, net of health care and other amounts receivable and reinsurance recoverables as of December 31, 2021, was \$62,593,407. As of December 31, 2022, \$74,452,514 has been paid for incurred claims attributable to insured events of prior years. Reserves remaining for prior years, net of health care and other amounts receivable and reinsurance recoverables are now \$6,536,028, as a result of re-estimation of unpaid claims. Therefore, there has been \$18,395,135 unfavorable prior year development since December 31, 2021 to December 31, 2022. The primary drivers consist of unfavorable development of \$25,357,006 in retroactivity for inpatient, outpatient, physician, and pharmacy claims offset by \$5,442,811 favorable development as result of a change in the provision for adverse deviations in experience and \$2,600,905 favorable development in provider settlement. At December 31, 2021, the company recorded \$9,407,197 of favorable prior year development. The primarily drivers consist of favorable development of \$8,550,443 in retroactivity for inpatient, outpatient, physician, and pharmacy claims, favorable development as a result of a change in the provision for adverse deviations in experience of \$4,852,766, and \$1,707,398 favorable development in risk share, partially offset by unfavorable development of \$3,697,140 in reinsurance and \$2,860,326 in provider settlements. Original estimates are increased or decreased, as additional information becomes known regarding individual claims, which could have an impact to the accruals for MLR rebates and retrospectively rated contracts. As a result of the prior year effects, on a regular basis, the Company adjusts revenue and the corresponding liability and/or receivable related to retrospectively rated policies and the impact of the change is included as a component of change in unearned premium reserves and reserve for rate credits in the financial statements.

The Company incurred CAE of \$56,892,277 and \$89,736,556 in 2022 and 2021, respectively. These costs are included in the management service fees paid by the Company to UHS as a part of the Agreement (see Note 10). The following table discloses paid CAE, incurred CAE, and the balance in unpaid CAE reserve for 2022 and 2021:

	2022	2021
Total claims adjustment expenses	\$ 56,892,277	\$ 89,736,556
Less: current year unpaid claims adjustment expenses	(1,152,367)	(793,706)
Add: prior year unpaid claims adjustment expenses	<u>793,706</u>	<u>848,628</u>
Total claims adjustment expenses paid	<u>\$ 56,533,616</u>	<u>\$ 89,791,478</u>

B. The Company did not make any significant changes in methodologies and assumptions used in the calculation of the liability for claims unpaid and unpaid CAE in 2022.

26. INTERCOMPANY POOLING ARRANGEMENTS

A–G. The Company did not have any intercompany pooling arrangements in 2022 or 2021.

27. STRUCTURED SETTLEMENTS

A–B. The Company did not have structured settlements in 2022 or 2021.

28. HEALTH CARE AND OTHER AMOUNTS RECEIVABLE

A. Pharmacy rebates receivable are recorded when reasonably estimated or billed by the affiliated pharmaceutical benefit manager in accordance with pharmaceutical rebate contract provisions. Information used to support rebates billed to the manufacturer is based on utilization information gathered by the pharmaceutical benefit manager and adjusted for significant changes in pharmaceutical contract provisions.

The Company evaluates the admissibility of all pharmacy rebates receivable based on the administration of each underlying pharmaceutical benefit management agreement. The Company has nonadmitted and excluded all pharmacy rebates receivable that do not meet the admissibility criteria of SSAP No. 84, *Health Care and Government Insured Plan Receivables* (“SSAP No. 84”) from the financial statements.

For each pharmaceutical management agreement for which a portion of the total pharmacy rebates receivable can be admitted based on the admissibility criteria of SSAP No. 84, the pharmacy rebate transaction history is summarized as follows:

Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received within 90 Days of Billing	Actual Rebates Received within 91 to 180 Days of Billing	Actual Rebates Received More than 180 Days after Billing
12/31/2022	\$ 12,883,110	\$4,242,642	\$ -	\$ -	\$ -
9/30/2022	11,933,967	12,090,582	7,070,883	-	-
6/30/2022	10,685,545	10,903,918	8,727,188	1,594,237	-
3/31/2022	9,370,437	9,599,437	7,012,369	1,995,412	189,414
12/31/2021	7,651,602	7,279,903	5,898,528	1,382,818	29,444
9/30/2021	6,992,013	6,837,256	6,027,432	649,224	152,237
6/30/2021	6,663,931	6,251,518	5,323,715	841,993	37,586
3/31/2021	5,420,240	5,105,550	3,790,996	1,305,965	(12,292)
12/31/2020	3,351,513	3,751,827	2,893,318	1,126,273	(294,438)
9/30/2020	3,952,139	3,852,668	2,903,650	939,375	(10,004)
6/30/2020	3,797,081	3,698,995	2,684,465	947,966	53,294
3/31/2020	3,187,857	3,207,973	796,255	2,361,807	69,565

Of the amount reported as health care and other amounts receivable, \$17,658,430 and \$10,566,760 relates to pharmacy rebates receivable as of December 31, 2022 and 2021, respectively. This change is primarily due to increased membership along with the change in generic/name brand mix.

B. The Company does not have any risk-sharing receivables.

The Company also admitted \$231,752 and \$150,414 of provider receivables resulting from claim overpayments and \$0 and \$641,788 in capitation arrangement receivables as of December 31, 2022 and December 31, 2021, respectively, which are included in health care and other amounts receivable in the financial statements.

Admitted health care and other amounts receivable also includes maternity case receivables due from MDHHS of \$4,500,927 and \$4,629,390 as of December 31, 2022 and 2021, respectively, reclassified from premiums and considerations based on Department requirements (see Note 1).

29. PARTICIPATING POLICIES

The Company did not have any participating contracts in 2022 or 2021.

30. PREMIUM DEFICIENCY RESERVES

The Company has not recorded any PDR as of December 31, 2022 or 2021. The analysis of PDR was completed as of December 31, 2022 and 2021. The Company did consider anticipated investment income when calculating the PDR.

The following table summarizes the Company’s PDR as of December 31, 2022 and 2021:

	2022
1. Liability carried for premium deficiency reserves	\$ -
2. Date of the most recent evaluation of this liability	12/31/2022
3. Was anticipated investment income utilized in this calculation?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	2021
1. Liability carried for premium deficiency reserves	\$ -
2. Date of the most recent evaluation of this liability	12/31/2021
3. Was anticipated investment income utilized in this calculation?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

31. ANTICIPATED SALVAGE AND SUBROGATION

Due to the type of business being written, the Company has no salvage. As of December 31, 2022 and 2021, the Company had no specific accruals established for outstanding subrogation, as it is considered a component of the actuarial calculations used to develop the estimates of claims unpaid and aggregate health claim reserves.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES
GENERAL

1.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?
If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.

Yes [X] No []

1.2

If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?

Yes [X] No [] N/A []

1.3

State Regulating?

Michigan

1.4

Is the reporting entity publicly traded or a member of a publicly traded group?

Yes [X] No []

1.5

If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

0000731766

2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes [] No [X]

2.2

If yes, date of change:

3.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2021

3.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

12/31/2016

3.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

06/15/2018

3.4

By what department or departments?
Michigan Department of Insurance and Financial Services

3.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes [] No [] N/A [X]

3.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes [X] No [] N/A []

4.1

During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.11 sales of new business?
4.12 renewals?

Yes [] No [X]
Yes [] No [X]

4.2

During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.21 sales of new business?
4.22 renewals?

Yes [] No [X]
Yes [] No [X]

5.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?
If yes, complete and file the merger history data file with the NAIC.

Yes [] No [X]

5.2

If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile

6.1

Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes [] No [X]

6.2

If yes, give full information:

7.1

Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?

Yes [] No [X]

7.2

If yes,
7.21 State the percentage of foreign control;
7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

0.0 %

1 Nationality	2 Type of Entity

GENERAL INTERROGATORIES

8.1

Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board?

Yes [] No [X]

8.2

If the response to 8.1 is yes, please identify the name of the DIHC.
.....

8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes [X] No []

8.4

If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC
Optum Bank, Inc.	Salt Lake City, UT .....	...NO...	...NO...	...YES...	...NO...

8.5

Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the depository institution holding company?

Yes [] No [X]

8.6

If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule?

Yes [] No [X] N/A []

9.

What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
Deloitte & Touche LLP, Minneapolis, MN

10.1

Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation?

Yes [] No [X]

10.2

If the response to 10.1 is yes, provide information related to this exemption:
.....

10.3

Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?

Yes [] No [X]

10.4

If the response to 10.3 is yes, provide information related to this exemption:
.....

10.5

Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?

Yes [X] No [] N/A []

10.6

If the response to 10.5 is no or n/a, please explain
.....

11.

What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
Gary A. Iannone, Vice President of Actuarial Services of United HealthCare Services Inc., an affiliate of UnitedHealthcare Community Plan, Inc., 185 Asylum Street, Hartford, CT 06103

12.1

Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?

Yes [] No [X]

12.11

Name of real estate holding company ...

12.12

Number of parcels involved

0

12.13

Total book/adjusted carrying value

\$0

12.2

If, yes provide explanation:
.....

13.

FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:

13.1

What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?
.....

13.2

Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?

Yes [] No []

13.3

Have there been any changes made to any of the trust indentures during the year?

Yes [] No []

13.4

If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?

Yes [] No [] N/A []

14.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?

Yes [X] No []

a.

Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;

b.

Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;

c.

Compliance with applicable governmental laws, rules and regulations;

d.

The prompt internal reporting of violations to an appropriate person or persons identified in the code; and

e.

Accountability for adherence to the code.

14.11

If the response to 14.1 is No, please explain:
.....

14.2

Has the code of ethics for senior managers been amended?

Yes [] No [X]

14.21

If the response to 14.2 is yes, provide information related to amendment(s).
.....

14.3

Have any provisions of the code of ethics been waived for any of the specified officers?

Yes [] No [X]

14.31

If the response to 14.3 is yes, provide the nature of any waiver(s).
.....

GENERAL INTERROGATORIES

- 15.1

Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?

Yes [] No [X]
- 15.2

If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount

BOARD OF DIRECTORS

16.

Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof?

Yes [X] No []
17.

Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof?

Yes [X] No []
18.

Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person?

Yes [X] No []

FINANCIAL

19.

Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)?

Yes [] No [X]
- 20.1

Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

20.11 To directors or other officers.....\$ 0

20.12 To stockholders not officers.....\$ 0

20.13 Trustees, supreme or grand (Fraternal Only)\$ 0
- 20.2

Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):

20.21 To directors or other officers.....\$ 0

20.22 To stockholders not officers.....\$ 0

20.23 Trustees, supreme or grand (Fraternal Only)\$ 0
- 21.1

Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement?

Yes [] No [X]
- 21.2

If yes, state the amount thereof at December 31 of the current year:

21.21 Rented from others.....\$ 0

21.22 Borrowed from others.....\$ 0

21.23 Leased from others\$ 0

21.24 Other\$ 0
- 22.1

Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments?

Yes [X] No []
- 22.2

If answer is yes:

22.21 Amount paid as losses or risk adjustment \$ 1,267

22.22 Amount paid as expenses\$ 341,430

22.23 Other amounts paid\$ 0
- 23.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes [] No [X]
- 23.2

If yes, indicate any amounts receivable from parent included in the Page 2 amount:

\$ 0
- 24.1

Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days?

Yes [] No [X]
- 24.2

If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

Name of Third-Party	Is the Third-Party Agent a Related Party (Yes/No)

INVESTMENT

- 25.01

Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 25.03)

Yes [X] No []

GENERAL INTERROGATORIES

25.02 If no, give full and complete information relating thereto

25.03 For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)

25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions. \$ 0

25.05 For the reporting entity's securities lending program, report amount of collateral for other programs. \$ 0

25.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [] N/A [X]

25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [] N/A [X]

25.08 Does the reporting entity or the reporting entity 's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending? Yes [] No [] N/A [X]

25.09 For the reporting entity's securities lending program state the amount of the following as of December 31 of the current year:

25.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. \$ 0

25.092 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$ 0

25.093 Total payable for securities lending reported on the liability page. \$ 0

26.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03). Yes [X] No []

26.2 If yes, state the amount thereof at December 31 of the current year:

26.21 Subject to repurchase agreements \$ 0

26.22 Subject to reverse repurchase agreements \$ 0

26.23 Subject to dollar repurchase agreements \$ 0

26.24 Subject to reverse dollar repurchase agreements \$ 0

26.25 Placed under option agreements \$ 0

26.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock \$ 0

26.27 FHLB Capital Stock \$ 0

26.28 On deposit with states 1,106,065

26.29 On deposit with other regulatory bodies \$ 0

26.30 Pledged as collateral - excluding collateral pledged to an FHLB \$ 0

26.31 Pledged as collateral to FHLB - including assets backing funding agreements \$ 0

26.32 Other \$ 0

26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

27.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No [X]

27.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A []
If no, attach a description with this statement.

LINES 27.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

27.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? . Yes [] No []

27.4 If the response to 27.3 is YES, does the reporting entity utilize:

27.41 Special accounting provision of SSAP No. 108 Yes [] No []

27.42 Permitted accounting practice Yes [] No []

27.43 Other accounting guidance Yes [] No []

27.5 By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following:

The reporting entity has obtained explicit approval from the domiciliary state.

Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.

Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.

Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

Yes [] No []

28.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes [] No [X]

28.2 If yes, state the amount thereof at December 31 of the current year. \$ 0

29. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?..... Yes [X] No []

29.01 For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian's Address
Bank of New York Mellon	Global Liquidity Services, 1 Wall St, 14th Floor, New York, NY 10286
Northern Trust	50 S. LaSalle, Chicago, IL 60675

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE UnitedHealthcare Community Plan, Inc.

GENERAL INTERROGATORIES

29.02 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)
.....

29.03 Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year?..... Yes [] No [X]

29.04 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason
.....

29.05 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts"; "...handle securities"]

1 Name of Firm or Individual	2 Affiliation
Internally Managed	I.....
J.P. Morgan Asset Management	U.....
Wellington Management Company, LLP	U.....
.....

29.0597 For those firms/individuals listed in the table for Question 29.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [X] No []

29.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [] No [X]

29.06 For those firms or individuals listed in the table for 29.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1	2	3	4	5
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Investment Management Agreement (IMA) Filed
107038	J.P. Morgan Asset Management	549300W78QH4XMM6K69	SEC	NO.....
106595	Wellington Management Company, LLP	549300YHP12TEZNL41	SEC	NO.....
.....

30.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])? Yes [] No [X]

30.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
30.2999 - Total		0

30.3 For each mutual fund listed in the table above, complete the following schedule:

1	2	3	4
Name of Mutual Fund (from above table)	Name of Significant Holding of the Mutual Fund	Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	Date of Valuation
.....

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE UnitedHealthcare Community Plan, Inc.

GENERAL INTERROGATORIES

31. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1	2	3
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1 Bonds	151,086,751	145,068,145	(6,018,605)
31.2 Preferred stocks	0	0	0
31.3 Totals	151,086,751	145,068,145	(6,018,605)

- 31.4 Describe the sources or methods utilized in determining the fair values:
For those securities that had prices in the NAIC SVO ISIS database, those prices were used; for those securities that did not have prices in the NAIC SVO ISIS database, pricing was obtained from Hub which is an external data sources vendor. Hub utilizes various pricing sources.
- 32.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [] No [X]
- 32.2 If the answer to 32.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [] No []
- 32.3 If the answer to 32.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:
.....
- 33.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No []
- 33.2 If no, list exceptions:
.....
34. By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:
a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
b. Issuer or obligor is current on all contracted interest and principal payments.
c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.
Has the reporting entity self-designated 5GI securities? Yes [] No [X]
35. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:
a. The security was purchased prior to January 1, 2018.
b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.
Has the reporting entity self-designated PLGI securities? Yes [] No [X]
36. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
a. The shares were purchased prior to January 1, 2019.
b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
d. The fund only or predominantly holds bonds in its portfolio.
e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.
Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No [X]
37. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:
a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments.
Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria? Yes [] No [X] N/A []

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE UnitedHealthcare Community Plan, Inc.

GENERAL INTERROGATORIES

- 38.1

Does the reporting entity directly hold cryptocurrencies?

Yes [] No [X]
- 38.2

If the response to 38.1 is yes, on what schedule are they reported?
.....
- 39.1

Does the reporting entity directly or indirectly accept cryptocurrencies as payments for premiums on policies?

Yes [] No [X]
- 39.2

If the response to 39.1 is yes, are the cryptocurrencies held directly or are they immediately converted to U.S. dollars?
39.21 Held directly Yes [] No [X]
39.22 Immediately converted to U.S. dollars Yes [] No [X]
- 39.3

If the response to 38.1 or 39.1 is yes, list all cryptocurrencies accepted for payments of premiums or that are held directly.

1	2	3
Name of Cryptocurrency	Immediately Converted to USD, Directly Held, or Both	Accepted for Payment of Premiums
.....

OTHER

- 40.1

Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?

\$0
- 40.2

List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1	2
Name	Amount Paid
.....
- 41.1

Amount of payments for legal expenses, if any?

\$0
- 41.2

List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1	2
Name	Amount Paid
.....
- 42.1

Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any?

\$0
- 42.2

List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers, or departments of government during the period covered by this statement.

1	2
Name	Amount Paid
.....

GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

1.1

Does the reporting entity have any direct Medicare Supplement Insurance in force?

Yes [] No [X]

1.2

If yes, indicate premium earned on U.S. business only.

\$ 0

1.3

What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?

\$ 0

1.31

Reason for excluding

.....

1.4

Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above

\$ 0

1.5

Indicate total incurred claims on all Medicare Supplement Insurance.

\$ 0

1.6

Individual policies:

Most current three years:

1.61

Total premium earned

\$ 0

1.62

Total incurred claims

\$ 0

1.63

Number of covered lives

0

All years prior to most current three years:

1.64

Total premium earned

\$ 0

1.65

Total incurred claims

\$ 0

1.66

Number of covered lives

0

1.7

Group policies:

Most current three years:

1.71

Total premium earned

\$ 0

1.72

Total incurred claims

\$ 0

1.73

Number of covered lives

0

All years prior to most current three years:

1.74

Total premium earned

\$ 0

1.75

Total incurred claims

\$ 0

1.76

Number of covered lives

0

2.

Health Test:

1

Current Year

2

Prior Year

2.1

Premium Numerator

1,380,864,406

1,306,091,955

2.2

Premium Denominator

1,380,864,406

1,306,091,995

2.3

Premium Ratio (2.1/2.2)

1.000

1.000

2.4

Reserve Numerator

157,780,990

215,562,235

2.5

Reserve Denominator

157,780,990

215,562,235

2.6

Reserve Ratio (2.4/2.5)

1.000

1.000

3.1

Has the reporting entity received any endowment or gift from contracting hospitals, physicians, dentists, or others that is agreed will be returned when, as and if the earnings of the reporting entity permits?

Yes [] No [X]

3.2

If yes, give particulars:

.....

4.1

Have copies of all agreements stating the period and nature of hospitals', physicians', and dentists' care offered to subscribers and dependents been filed with the appropriate regulatory agency?

Yes [X] No []

4.2

If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these agreements include additional benefits offered?

Yes [] No []

5.1

Does the reporting entity have stop-loss reinsurance?

Yes [X] No []

5.2

If no, explain:

.....

5.3

Maximum retained risk (see instructions)

5.31

Comprehensive Medical

\$ 375,000

5.32

Medical Only

\$ 0

5.33

Medicare Supplement

\$ 0

5.34

Dental & Vision

\$ 0

5.35

Other Limited Benefit Plan

\$ 0

5.36

Other

\$ 0

6.

Describe arrangement which the reporting entity may have to protect subscribers and their dependents against the risk of insolvency including hold harmless provisions, conversion privileges with other carriers, agreements with providers to continue rendering services, and any other agreements:
Hold harmless clauses in provider agreements and continuation of coverage endorsements in reinsurance agreements.

7.1

Does the reporting entity set up its claim liability for provider services on a service date basis?.....

Yes [X] No []

7.2

If no, give details

.....

8.

Provide the following information regarding participating providers:

8.1

Number of providers at start of reporting year

63,506

8.2

Number of providers at end of reporting year

66,274

9.1

Does the reporting entity have business subject to premium rate guarantees?

Yes [] No [X]

9.2

If yes, direct premium earned:

9.21

Business with rate guarantees between 15-36 months..

\$ 0

9.22

Business with rate guarantees over 36 months

\$ 0

GENERAL INTERROGATORIES

10.1 Does the reporting entity have Incentive Pool, Withhold or Bonus Arrangements in its provider contracts? Yes [X] No []

10.2 If yes:

10.21 Maximum amount payable bonuses.....\$7,357,458

10.22 Amount actually paid for year bonuses.....\$16,656,898

10.23 Maximum amount payable withholds.....\$408,143

10.24 Amount actually paid for year withholds.....\$626,507

11.1 Is the reporting entity organized as:

11.12 A Medical Group/Staff Model, Yes [] No [X]

11.13 An Individual Practice Association (IPA), or, Yes [] No [X]

11.14 A Mixed Model (combination of above)? Yes [] No [X]

11.2 Is the reporting entity subject to Statutory Minimum Capital and Surplus Requirements? Yes [X] No []

11.3 If yes, show the name of the state requiring such minimum capital and surplus. Michigan

11.4 If yes, show the amount required. \$ 148,506,679

11.5 Is this amount included as part of a contingency reserve in stockholder's equity? Yes [] No [X]

11.6 If the amount is calculated, show the calculation

The greater of 200% Risk Based Capital Authorized Control Level or 10% of the health maintenance organization's subscription revenue

12. List service areas in which reporting entity is licensed to operate:

1
Name of Service Area
Michigan - statewide
.....

13.1 Do you act as a custodian for health savings accounts? Yes [] No [X]

13.2 If yes, please provide the amount of custodial funds held as of the reporting date. \$0

13.3 Do you act as an administrator for health savings accounts? Yes [] No [X]

13.4 If yes, please provide the balance of funds administered as of the reporting date. \$0

14.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers? Yes [] No [] N/A [X]

14.2 If the answer to 14.1 is yes, please provide the following:

1	2 NAIC Company Code	3 Domiciliary Jurisdiction	4 Reserve Credit	Assets Supporting Reserve Credit		
				5 Letters of Credit	6 Trust Agreements	7 Other
Company Name						
.....						

15. Provide the following for individual ordinary life insurance* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded):

15.1 Direct Premium Written \$0

15.2 Total Incurred Claims\$0

15.3 Number of Covered Lives

*Ordinary Life Insurance Includes
Term(whether full underwriting, limited underwriting, jet issue, "short form app")
Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")
Variable Life (with or without secondary gurantee)
Universal Life (with or without secondary gurantee)
Variable Universal Life (with or without secondary gurantee)

16. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [] No [X]

16.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? Yes [] No [X]

FIVE-YEAR HISTORICAL DATA

	1 2022	2 2021	3 2020	4 2019	5 2018
Balance Sheet (Pages 2 and 3)					
1. Total admitted assets (Page 2, Line 28)	388,234,670	400,249,842	342,097,116	290,325,534	260,934,886
2. Total liabilities (Page 3, Line 24)	201,394,393	263,434,311	189,569,718	151,281,234	129,676,959
3. Statutory minimum capital and surplus requirement	148,506,679	123,692,904	39,630,418	61,771,330	57,252,350
4. Total capital and surplus (Page 3, Line 33)	186,840,277	136,815,531	152,527,398	139,044,300	131,257,927
Income Statement (Page 4)					
5. Total revenues (Line 8)	1,485,066,794	1,236,929,038	990,760,448	941,017,600	872,193,047
6. Total medical and hospital expenses (Line 18)	1,214,152,644	976,777,463	740,586,652	734,521,004	686,835,002
7. Claims adjustment expenses (Line 20)	56,892,277	89,736,556	45,945,872	50,467,348	45,197,283
8. Total administrative expenses (Line 21)	157,608,427	108,823,511	146,225,495	118,999,559	108,934,444
9. Net underwriting gain (loss) (Line 24)	56,413,446	61,591,508	58,002,429	37,029,689	32,127,318
10. Net investment gain (loss) (Line 27)	3,571,835	593,200	2,158,480	4,435,628	3,229,868
11. Total other income (Lines 28 plus 29)	7,617	(13,349)	(222,389)	(2,164)	(8,441)
12. Net income or (loss) (Line 32)	48,582,422	50,504,198	45,387,826	33,507,340	25,140,037
Cash Flow (Page 6)					
13. Net cash from operations (Line 11)	(33,056,039)	115,825,941	79,863,125	86,259,492	(3,042,304)
Risk-Based Capital Analysis					
14. Total adjusted capital	186,840,277	136,815,531	152,527,398	139,044,300	131,257,927
15. Authorized control level risk-based capital	43,985,342	8,081,739	15,473,833	30,885,665	28,626,175
Enrollment (Exhibit 1)					
16. Total members at end of period (Column 5, Line 7)	329,073	310,916	289,929	254,297	249,031
17. Total members months (Column 6, Line 7)	3,881,402	3,647,507	3,277,671	3,046,719	3,031,529
Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3 and 5) x 100.0					
18. Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5)	100.0	100.0	100.0	100.0	100.0
19. Total hospital and medical plus other non-health (Lines 18 plus Line 19)	81.8	79.0	74.7	78.1	78.7
20. Cost containment expenses	3.0	5.5	3.3	3.8	2.9
21. Other claims adjustment expenses	0.8	1.8	1.4	1.6	2.3
22. Total underwriting deductions (Line 23)	96.2	95.0	94.1	96.1	96.3
23. Total underwriting gain (loss) (Line 24)	3.8	5.0	5.9	3.9	3.7
Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24. Total claims incurred for prior years (Line 17, Col. 5)	80,988,541	65,264,691	67,888,715	57,725,625	94,228,310
25. Estimated liability of unpaid claims-[prior year (Line 17, Col. 6)]	62,593,408	74,671,887	85,656,055	62,692,135	91,530,602
Investments In Parent, Subsidiaries and Affiliates					
26. Affiliated bonds (Sch. D Summary, Line 12, Col. 1)	0	0	0	0	0
27. Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1)	0	0	0	0	0
28. Affiliated common stocks (Sch. D Summary, Line 24, Col. 1)	0	0	0	0	0
29. Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10)	0	0	0	0	0
30. Affiliated mortgage loans on real estate	0	0	0	0	0
31. All other affiliated	0	0	0	0	0
32. Total of above Lines 26 to 31	0	0	0	0	0
33. Total investment in parent included in Lines 26 to 31 above.	0	0	0	0	0

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors?

Yes [] No []

If no, please explain:

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE UnitedHealthcare Community Plan, Inc.

SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories											
		1	Direct Business Only								
			2	3	4	5	6	7	8	9	10
States, etc.		Active Status (a)	Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	CHIP Title XXI	Federal Employees Health Benefits Program Premiums	Life and Annuity Premiums & Other Considerations	Property/ Casualty Premiums	Total Columns 2 Through 8	Deposit-Type Contracts
1.	Alabama	AL	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
2.	Alaska	AK	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
3.	Arizona	AZ	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
4.	Arkansas	AR	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5.	California	CA	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6.	Colorado	CO	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7.	Connecticut	CT	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8.	Delaware	DE	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
9.	District of Columbia	DC	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
10.	Florida	FL	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
11.	Georgia	GA	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
12.	Hawaii	HI	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
13.	Idaho	ID	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
14.	Illinois	IL	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
15.	Indiana	IN	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
16.	Iowa	IA	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
17.	Kansas	KS	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.	Kentucky	KY	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
19.	Louisiana	LA	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
20.	Maine	ME	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
21.	Maryland	MD	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
22.	Massachusetts	MA	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
23.	Michigan	MI	L.....15,371,785	304,017,884	1,071,433,724	.....0	.....0	.....0	.....0	1,390,823,393	.....0
24.	Minnesota	MN	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
25.	Mississippi	MS	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
26.	Missouri	MO	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
27.	Montana	MT	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
28.	Nebraska	NE	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
29.	Nevada	NV	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
30.	New Hampshire	NH	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
31.	New Jersey	NJ	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
32.	New Mexico	NM	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
33.	New York	NY	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
34.	North Carolina	NC	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
35.	North Dakota	ND	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
36.	Ohio	OH	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
37.	Oklahoma	OK	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
38.	Oregon	OR	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
39.	Pennsylvania	PA	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
40.	Rhode Island	RI	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
41.	South Carolina	SC	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
42.	South Dakota	SD	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
43.	Tennessee	TN	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
44.	Texas	TX	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
45.	Utah	UT	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
46.	Vermont	VT	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
47.	Virginia	VA	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
48.	Washington	WA	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
49.	West Virginia	WV	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
50.	Wisconsin	WI	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
51.	Wyoming	WY	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
52.	American Samoa	AS	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
53.	Guam	GU	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
54.	Puerto Rico	PR	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
55.	U.S. Virgin Islands ..	VI	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
56.	Northern Mariana Islands	MP	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
57.	Canada	CAN	N.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
58.	Aggregate Other Aliens	OT	XXX.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
59.	Subtotal	XXX	.....15,371,785	304,017,884	1,071,433,724	.....0	.....0	.....0	.....0	1,390,823,393	.....0
60.	Reporting Entity Contributions for Employee Benefit Plans	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
61.	Totals (Direct Business)	XXX	15,371,785	304,017,884	1,071,433,724	0	0	0	0	1,390,823,393	0
DETAILS OF WRITE-INS											
58001.	.....	XXX	.....	.....	.....	.....	.....	.....	.....	.....	.....
58002.	.....	XXX	.....	.....	.....	.....	.....	.....	.....	.....	.....
58003.	.....	XXX	.....	.....	.....	.....	.....	.....	.....	.....	.....
58998.	Summary of remaining write-ins for Line 58 from overflow page	XXX	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
58999.	Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0	0	0	0

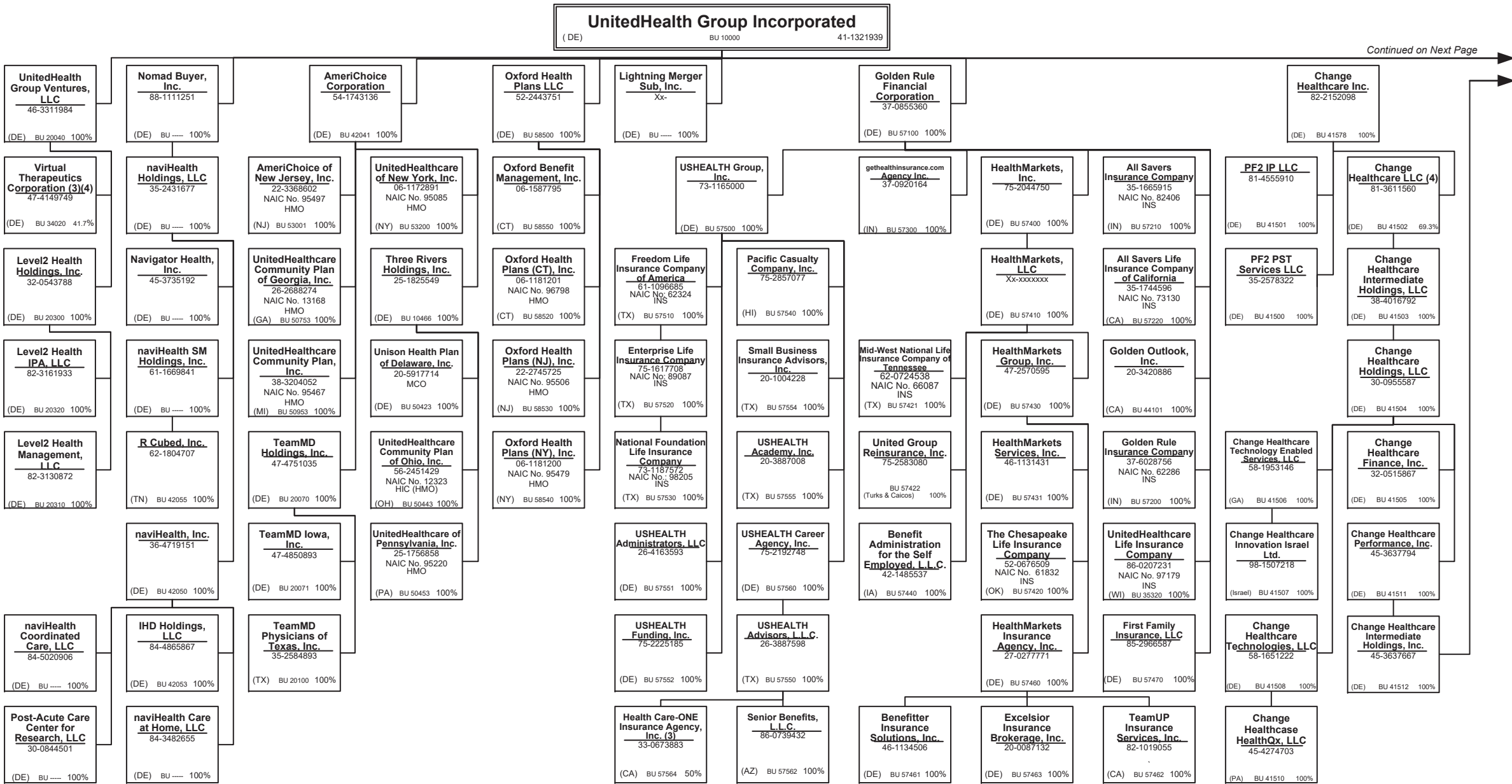
(a) Active Status Counts:

1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG.....	1	4. Q - Qualified - Qualified or accredited reinsurer.....	0
2. R - Registered - Non-domiciled RRGs.....	0	5. N - None of the above - Not allowed to write business in the state.....	56
3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state.	0		

(b) Explanation of basis of allocation by states, premiums by state, etc.

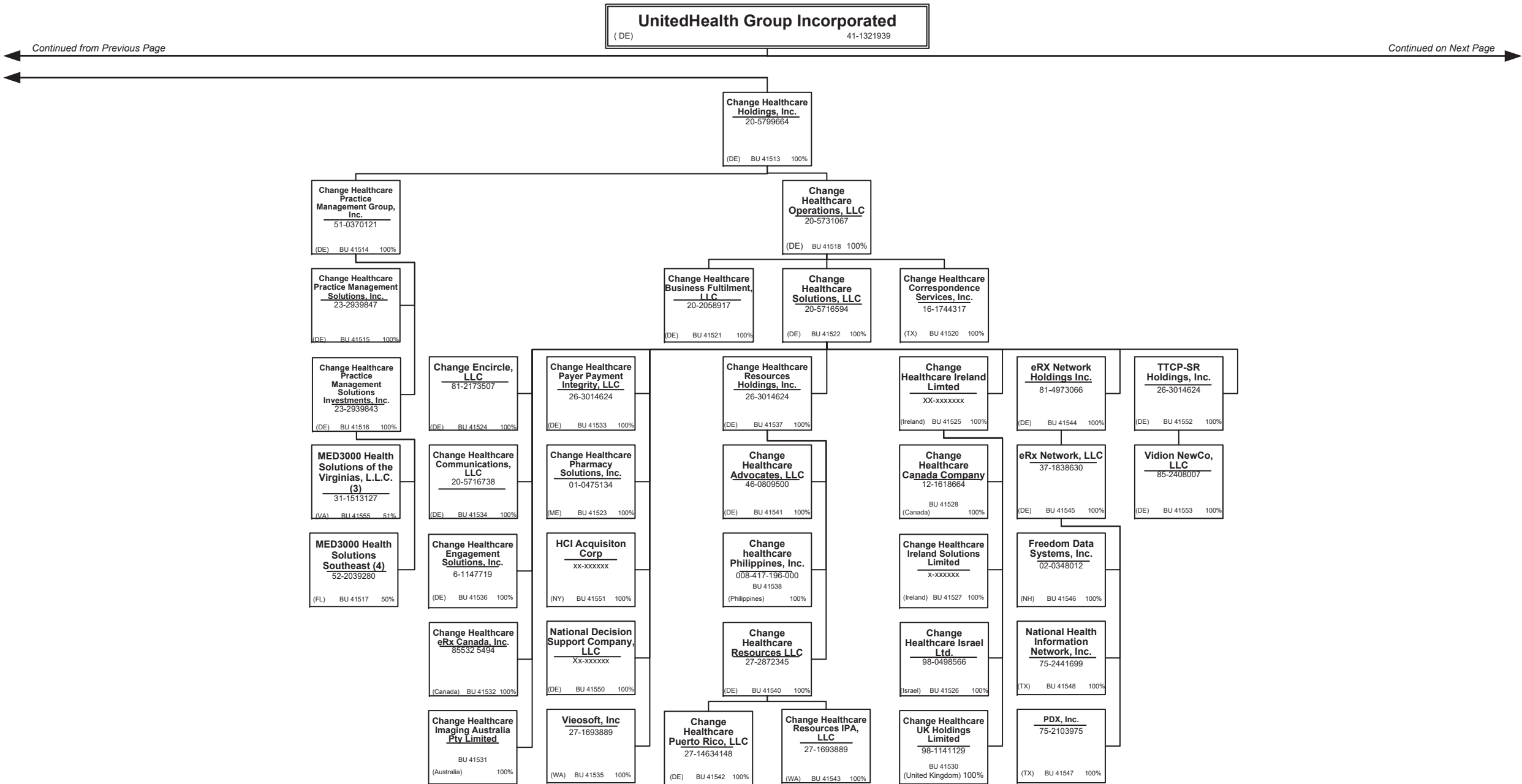
Premiums allocated by state based upon Geographic Market

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART



Continued on Next Page

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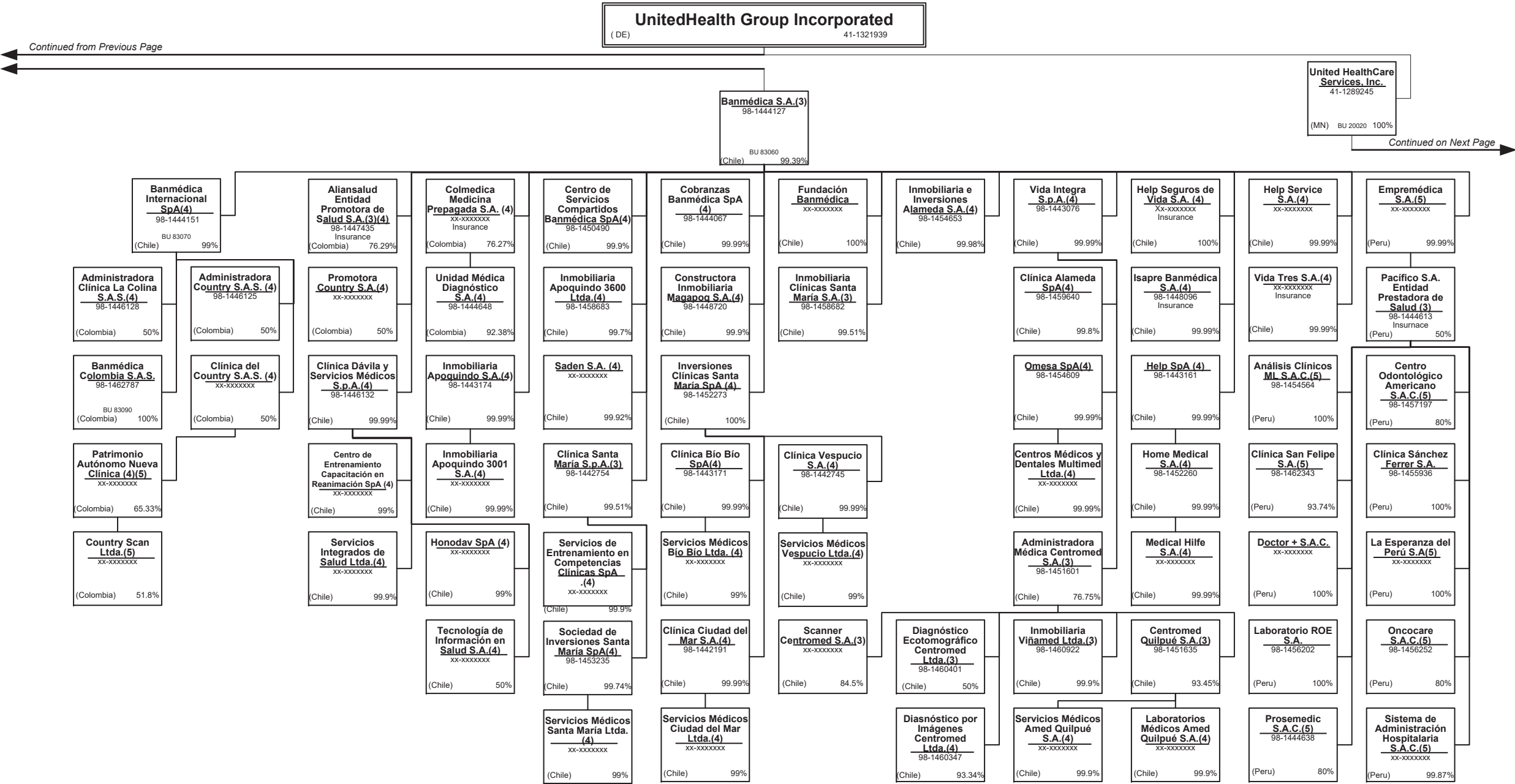
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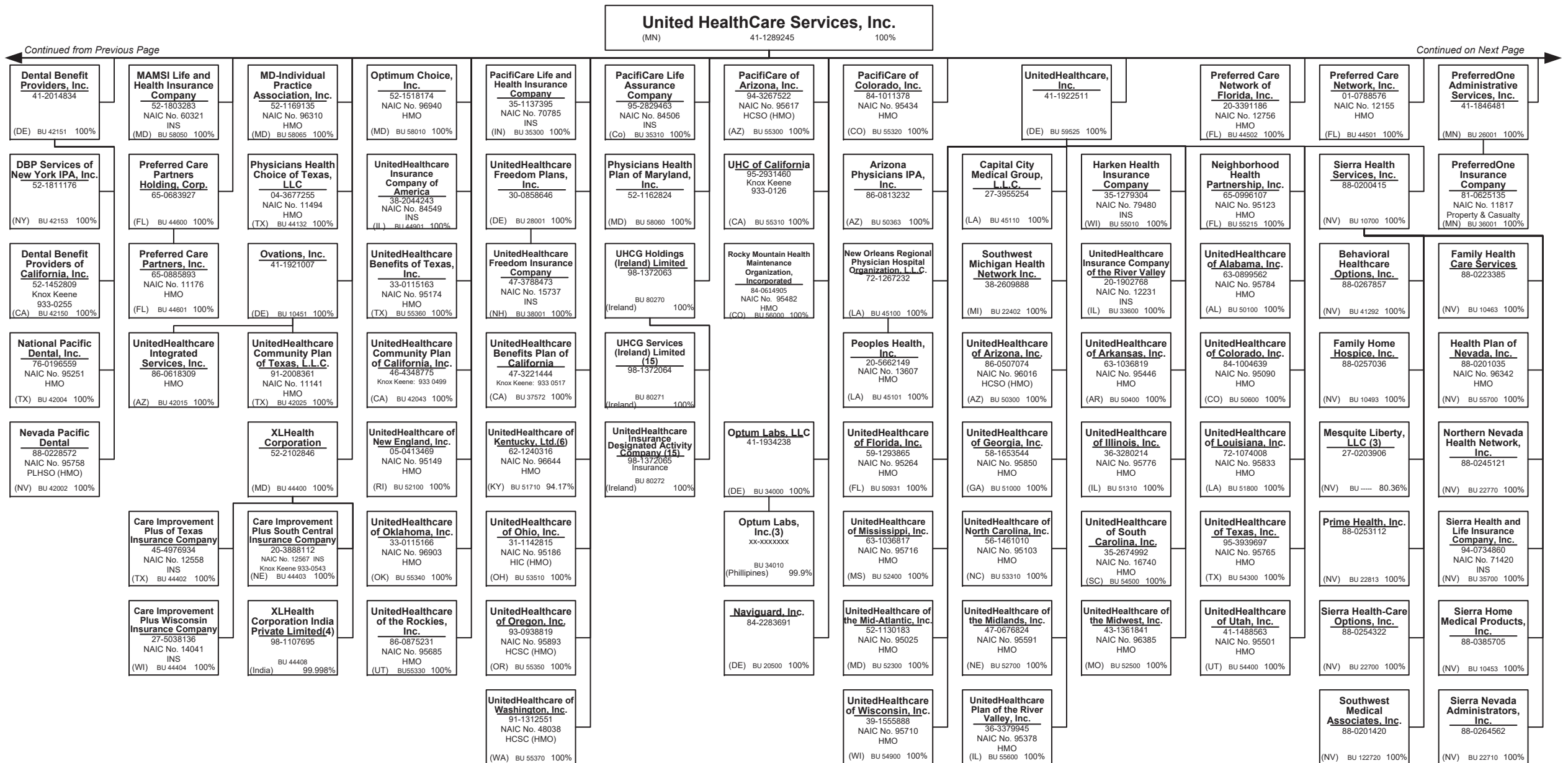
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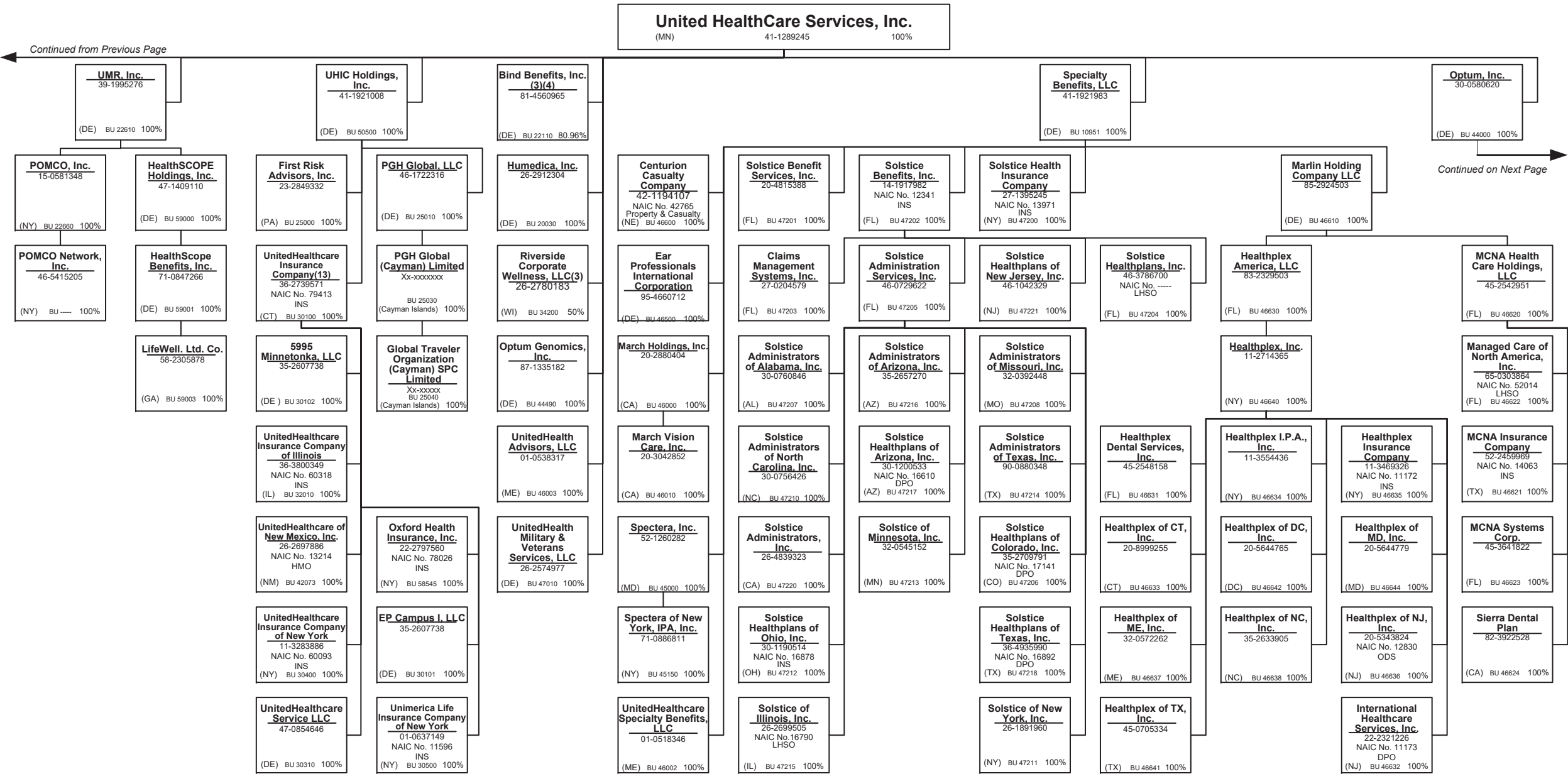
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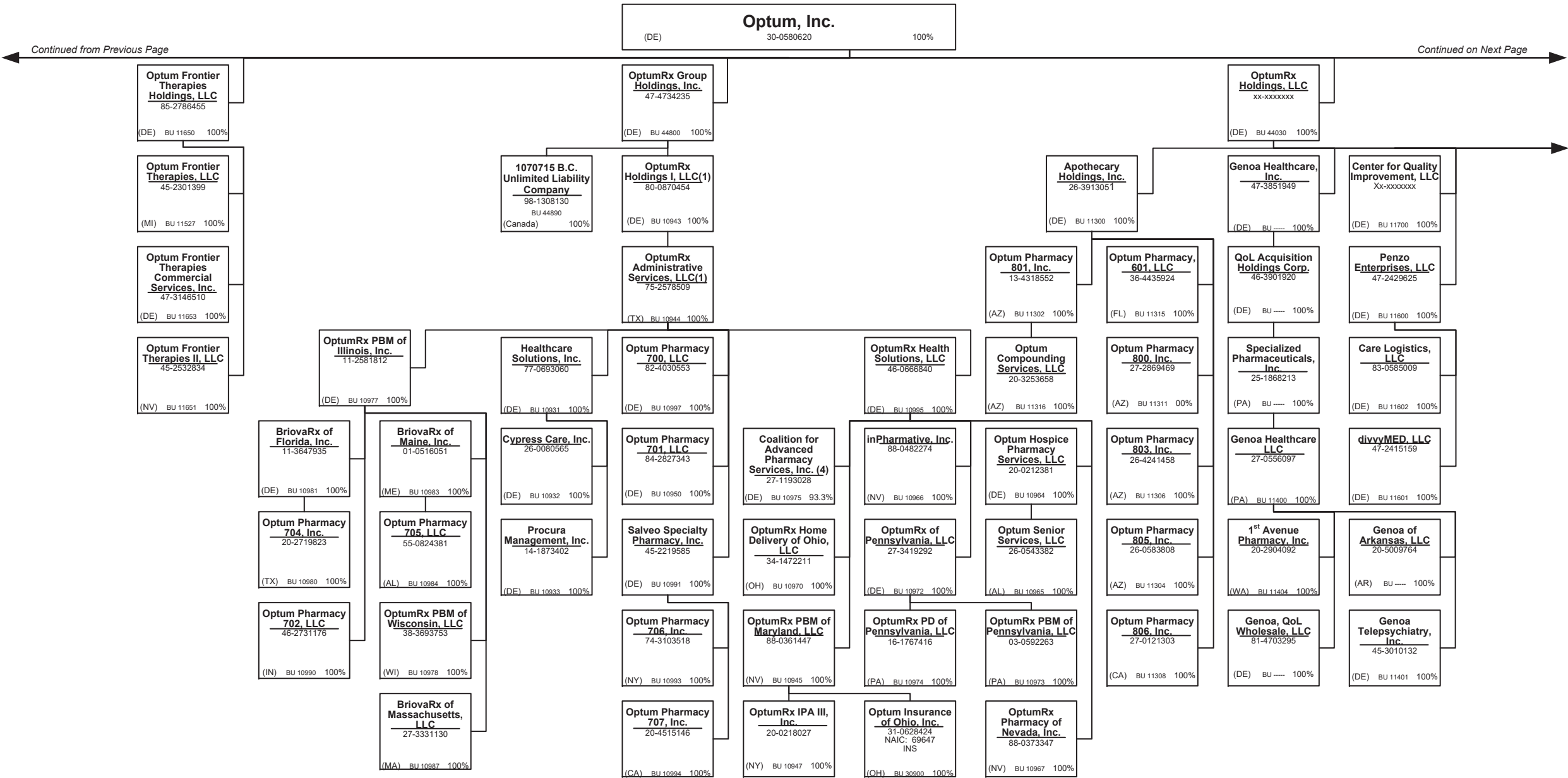
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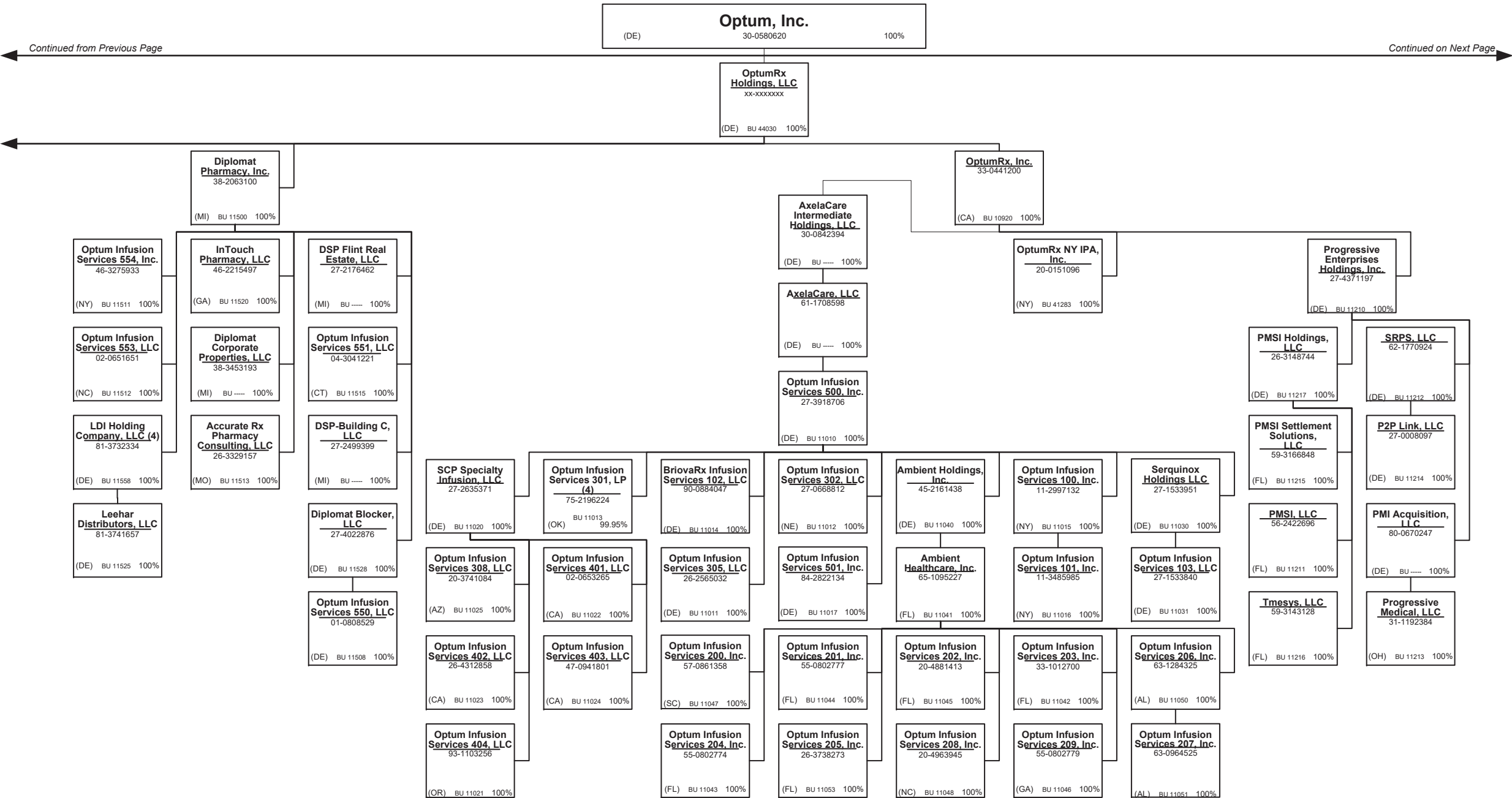
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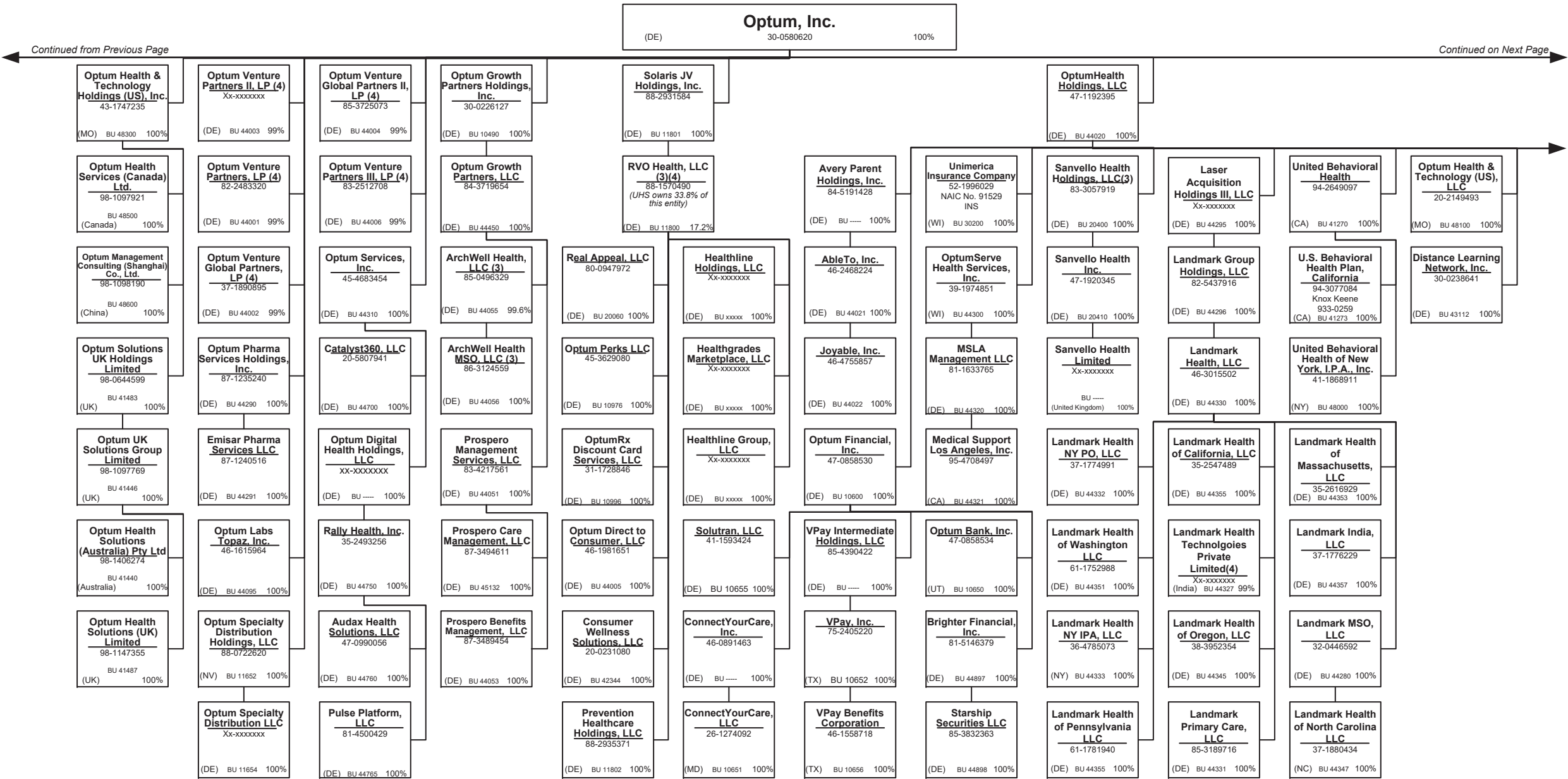
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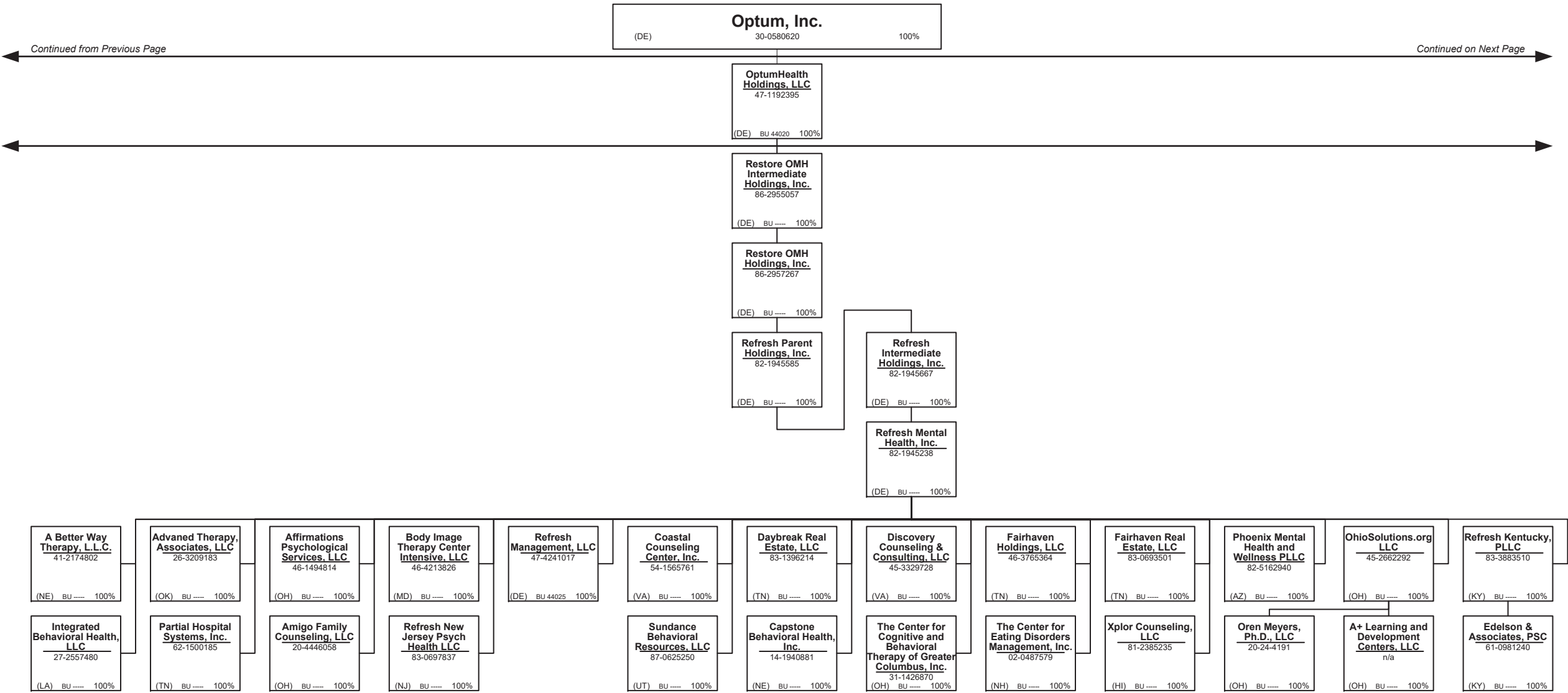
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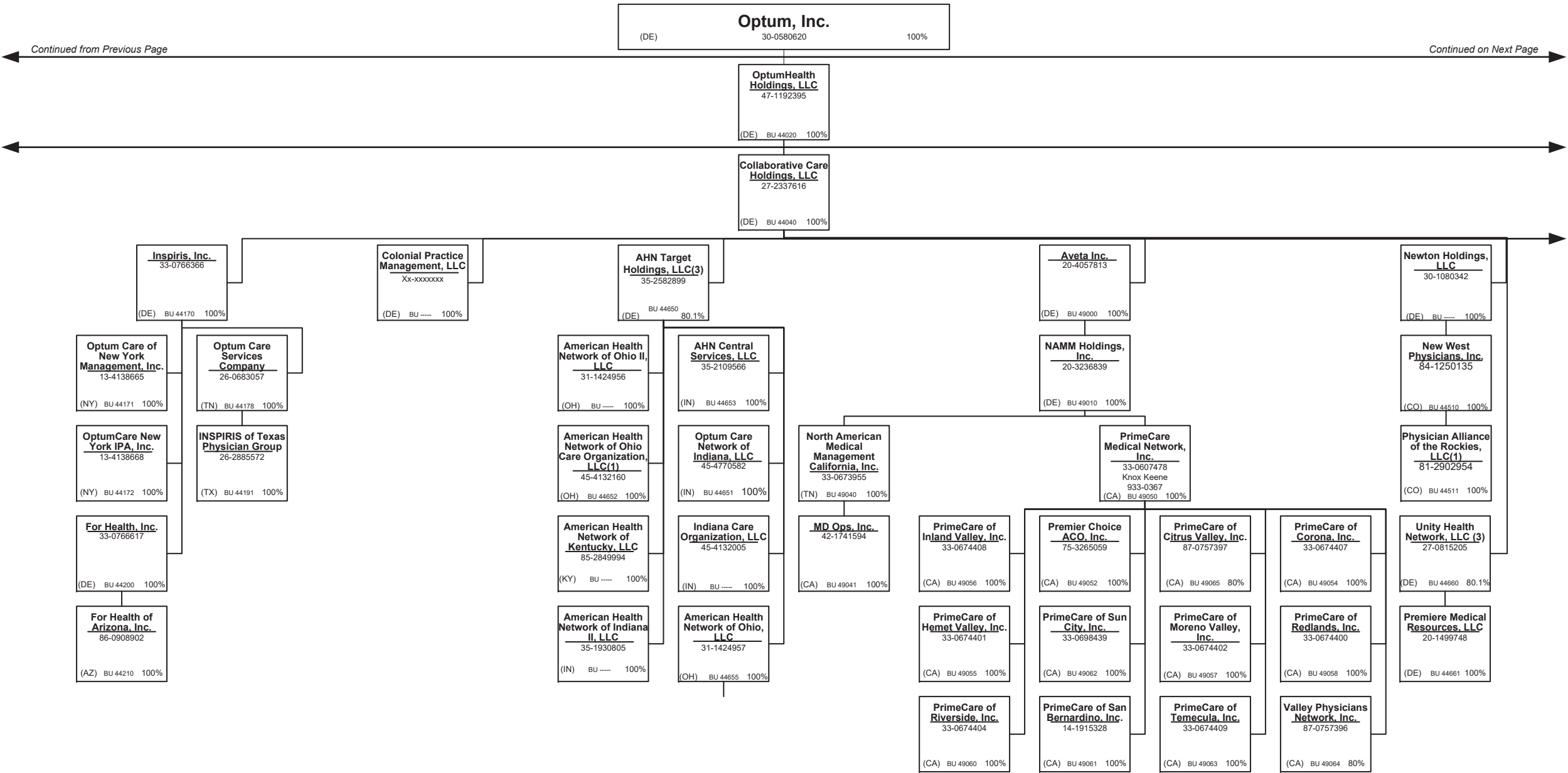
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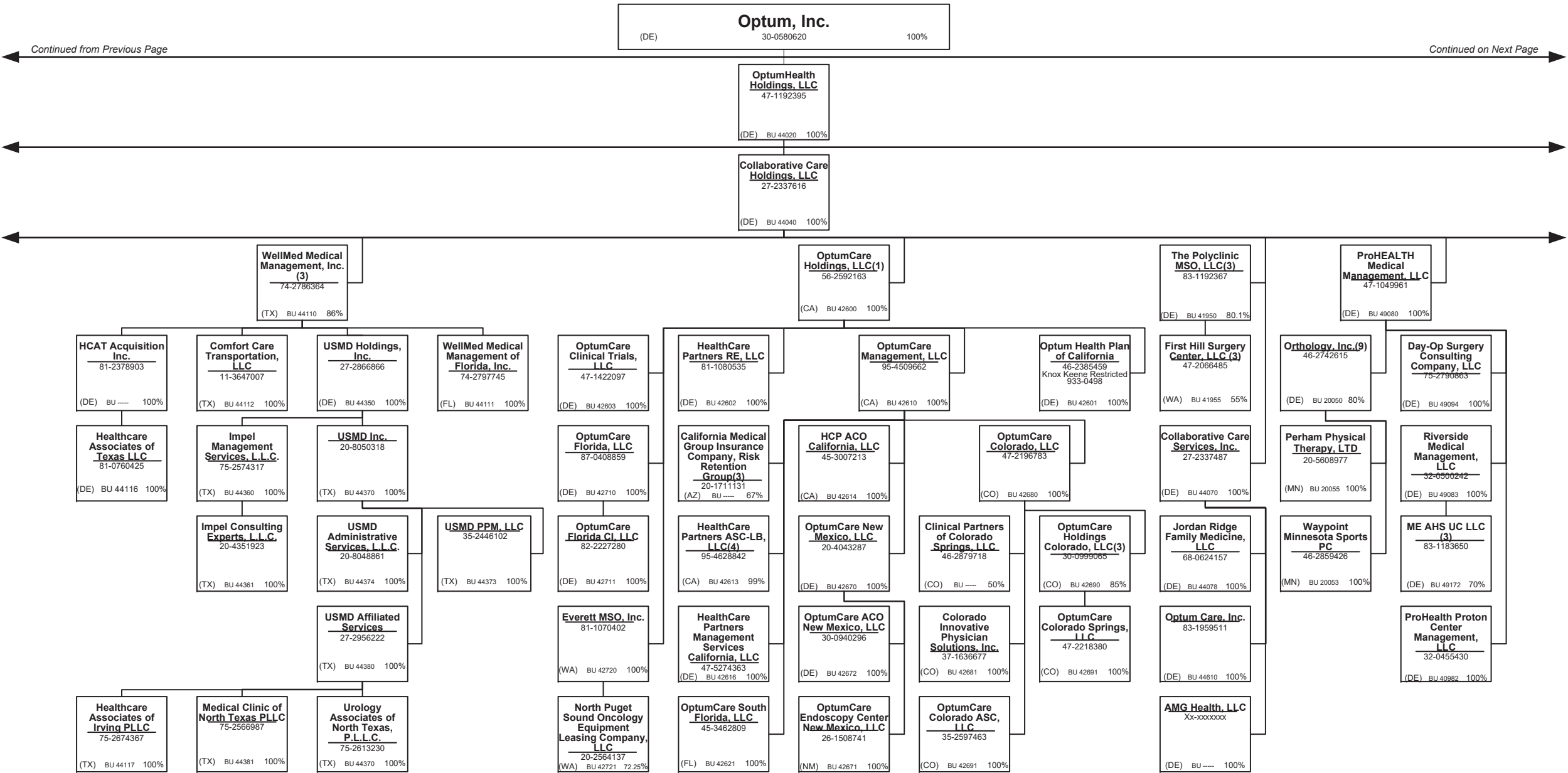
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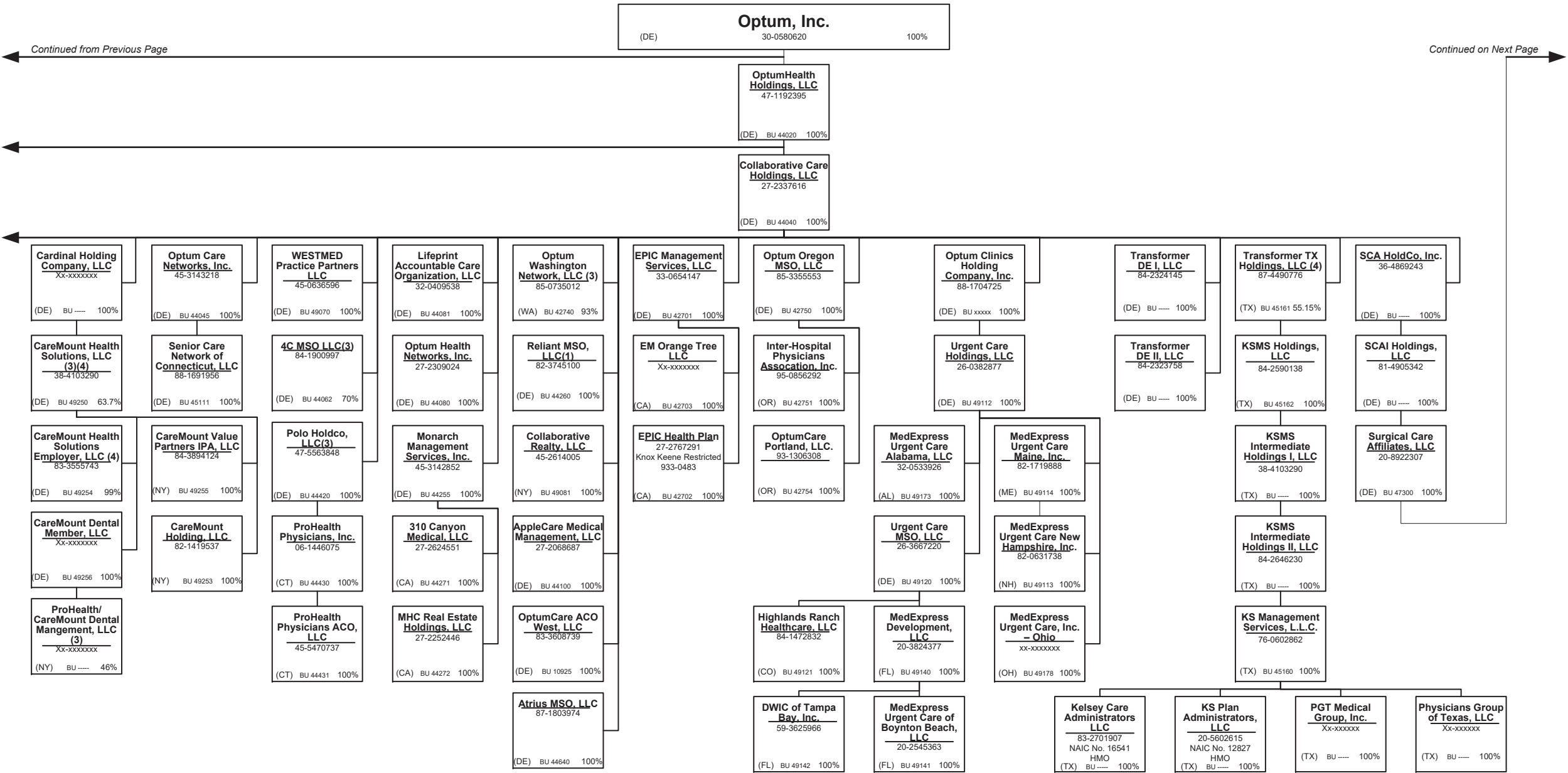
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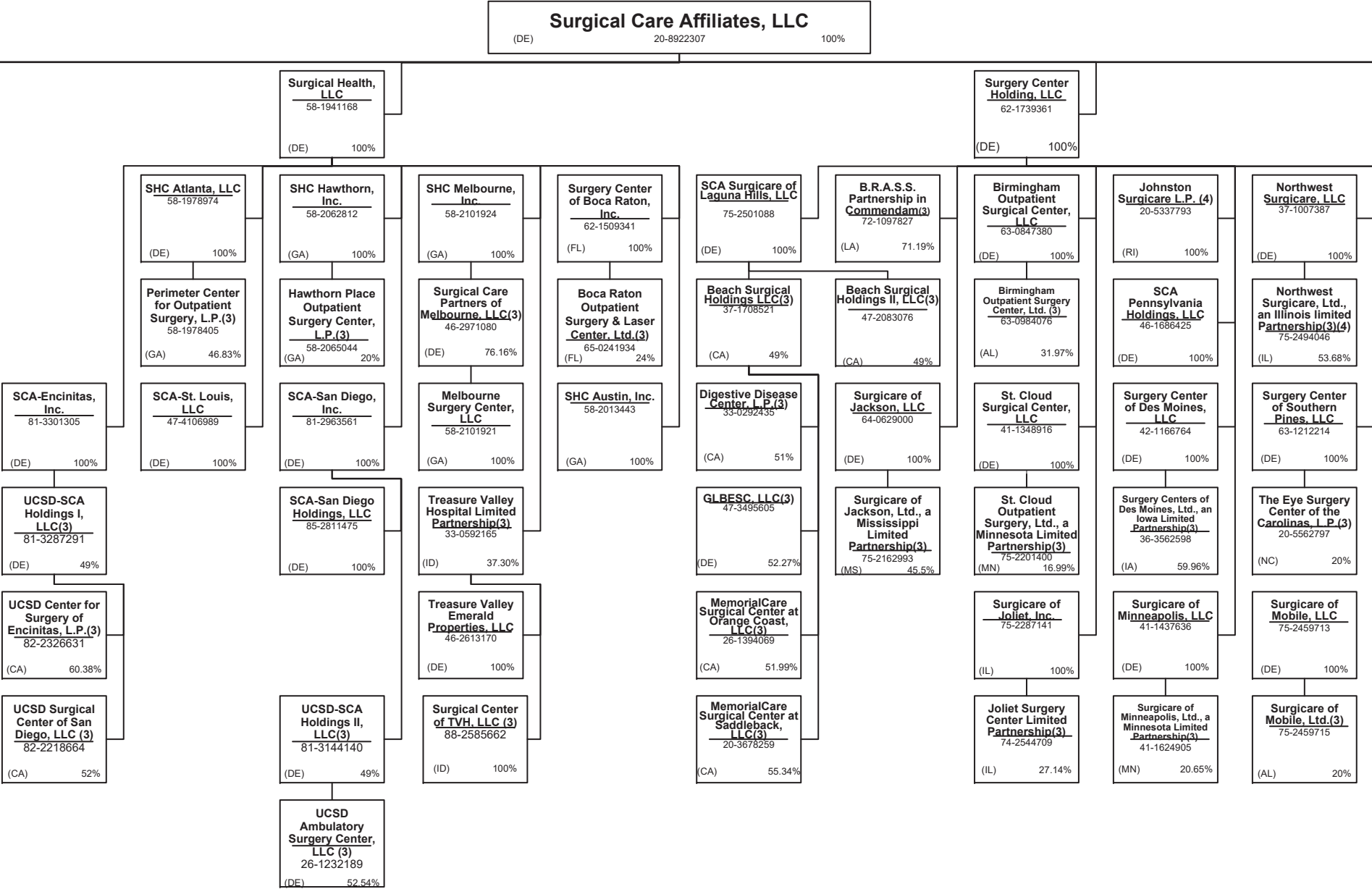
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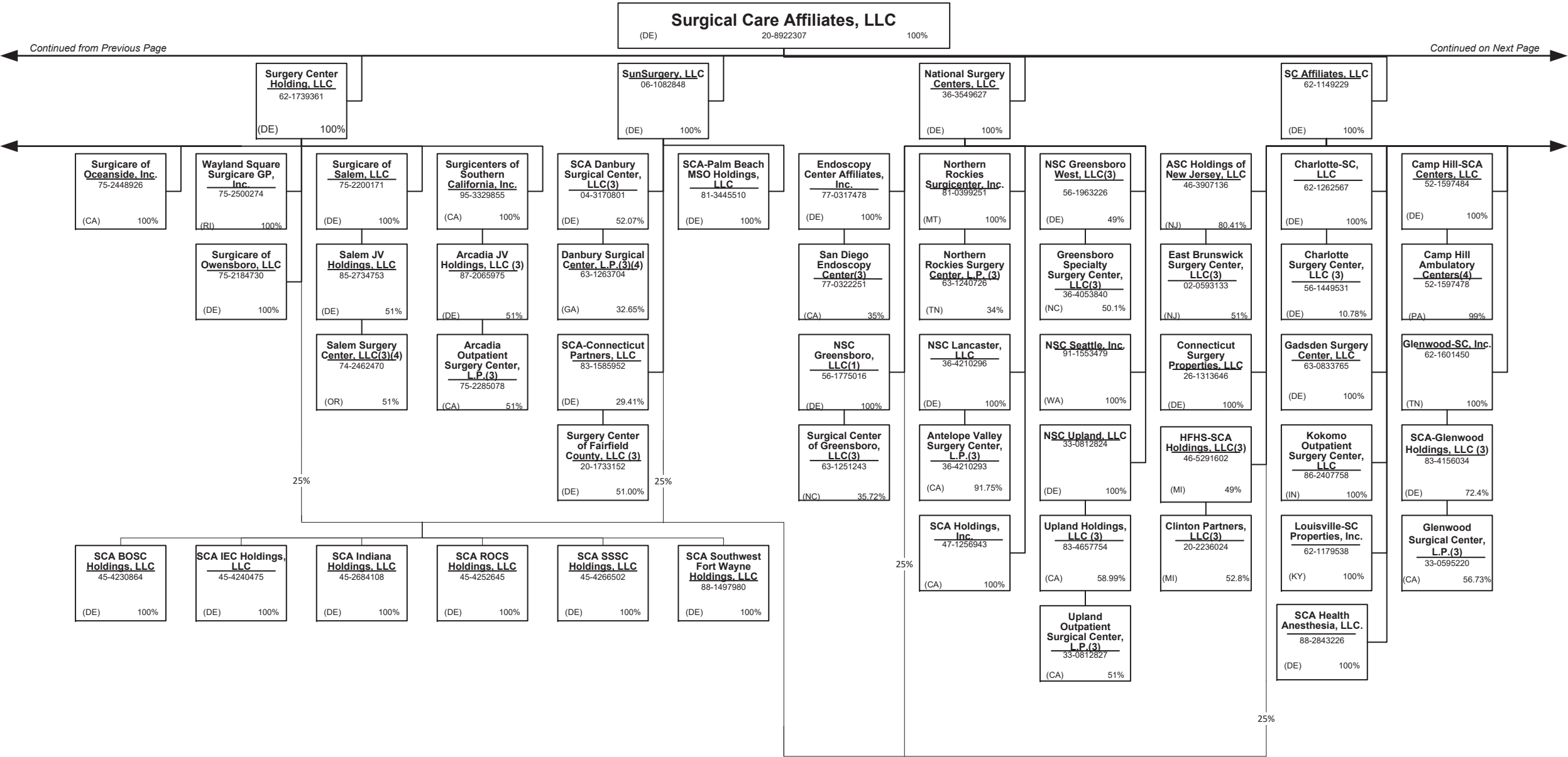
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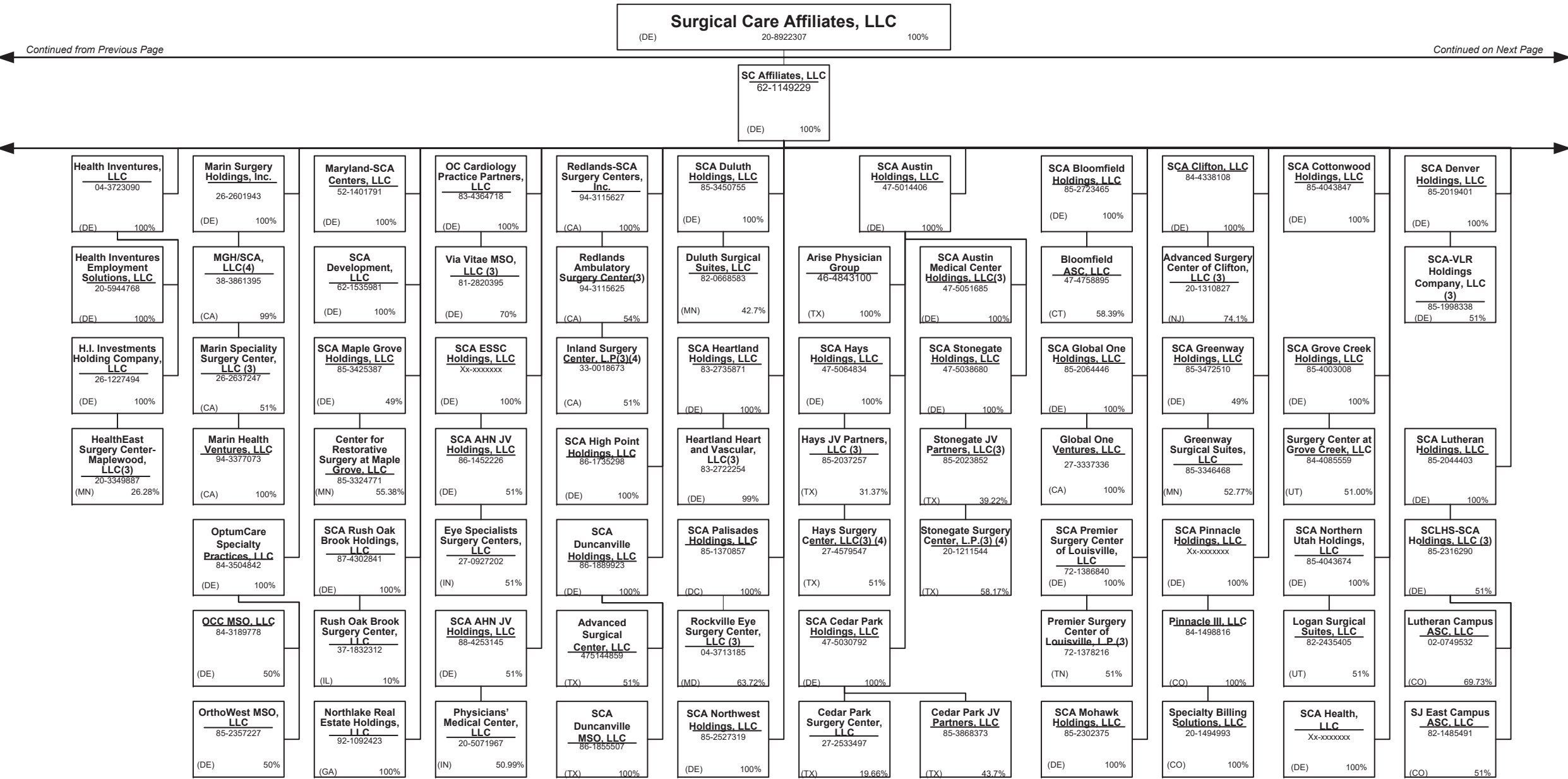
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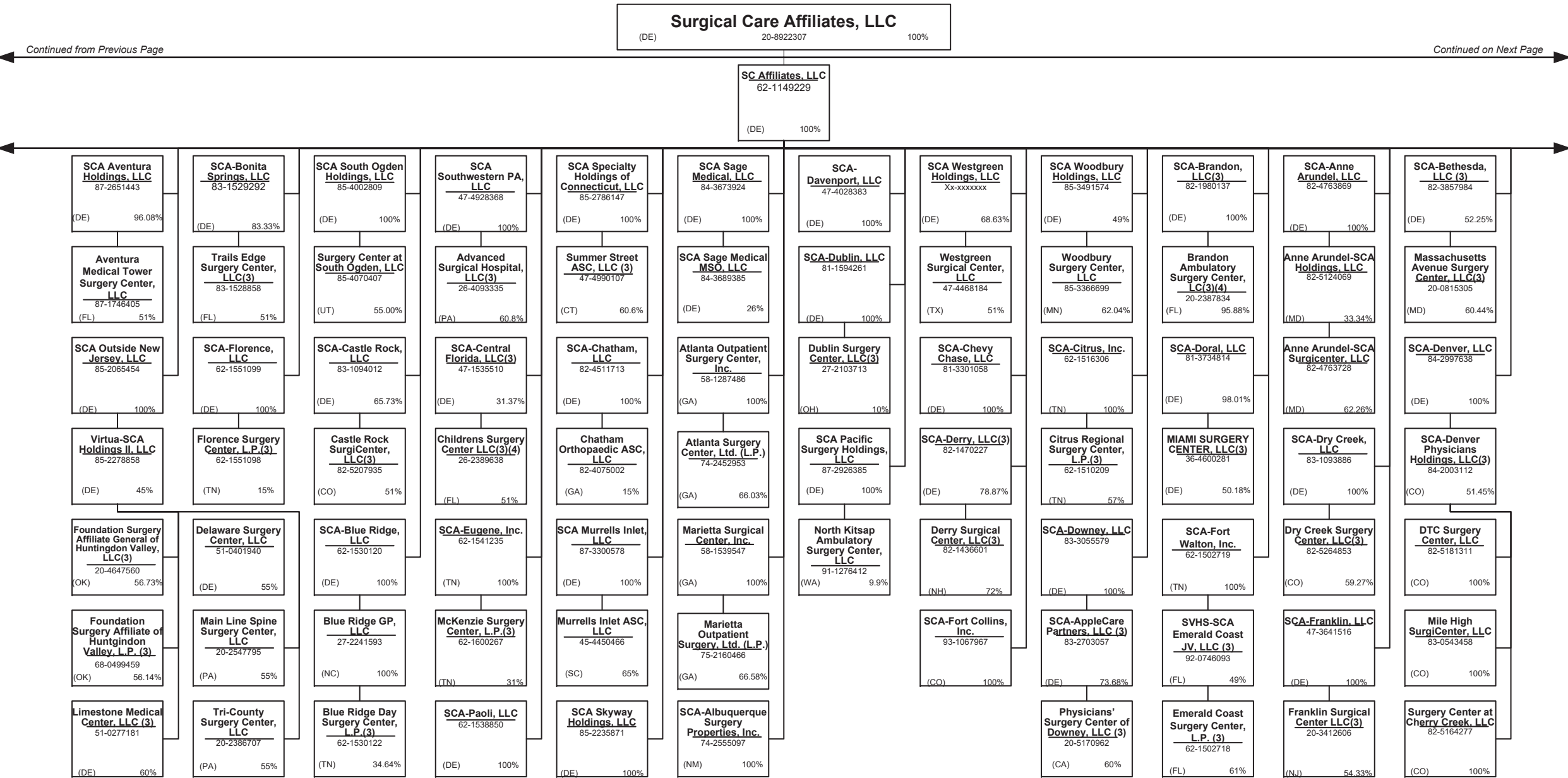
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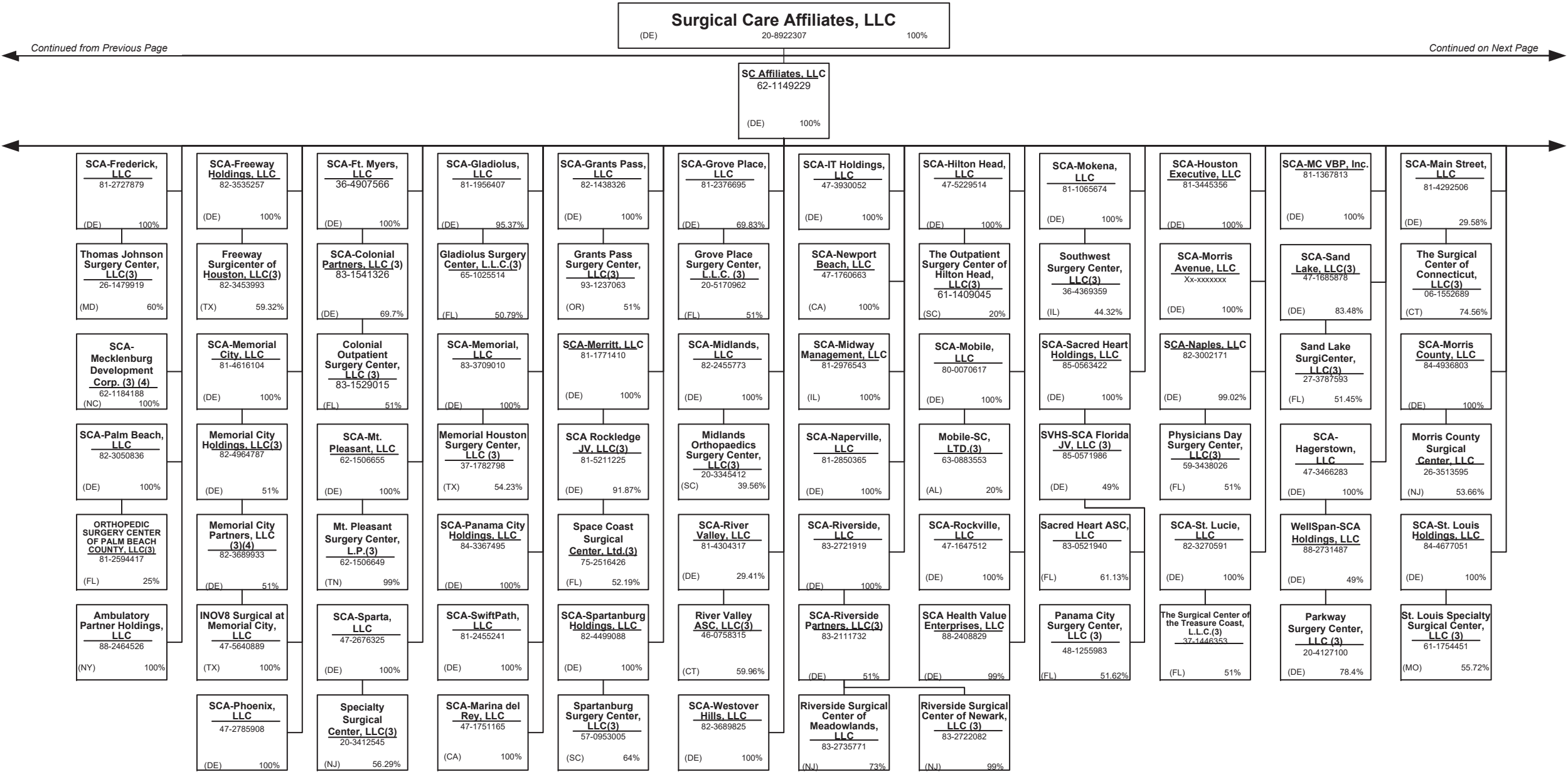
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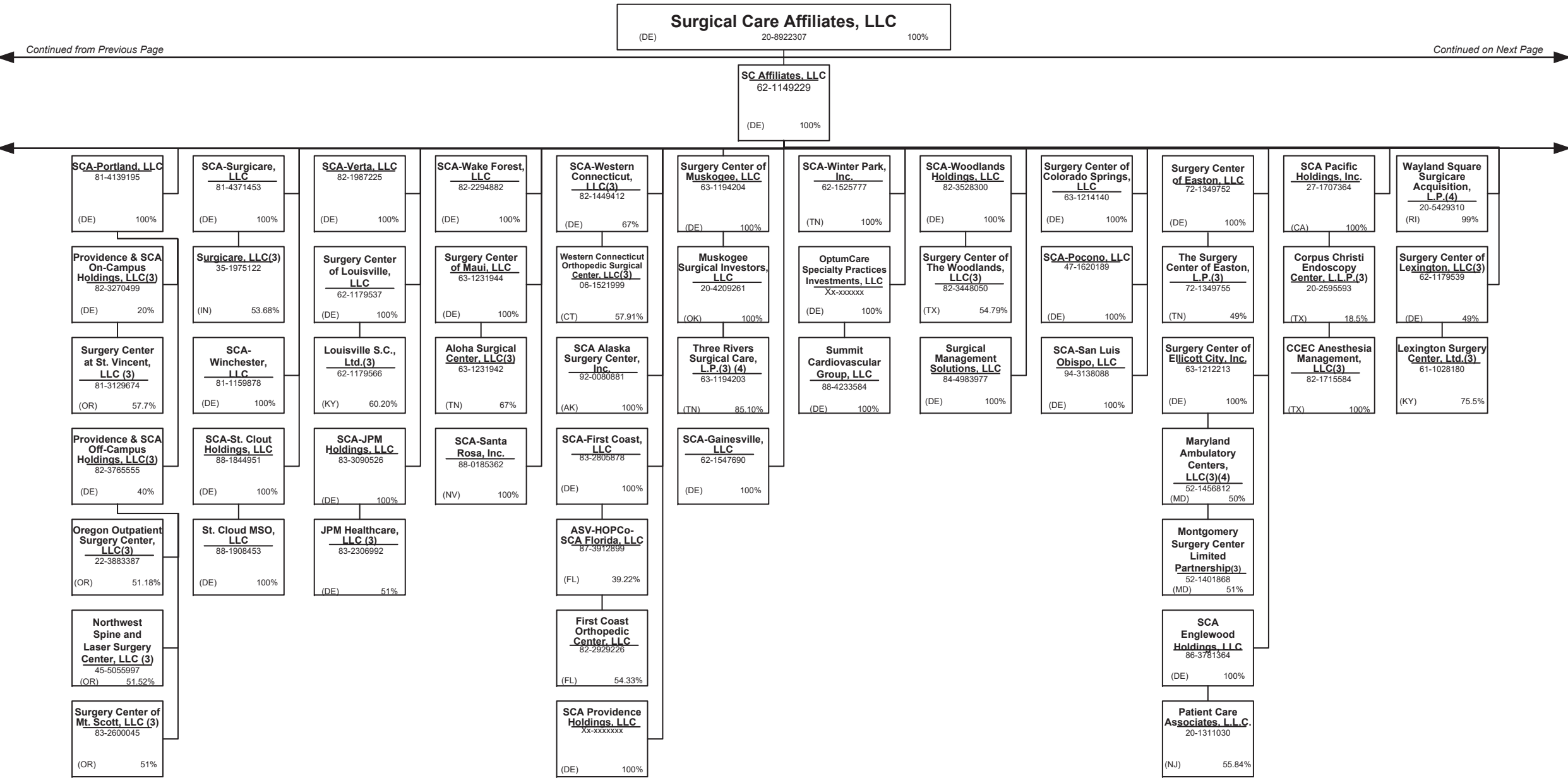
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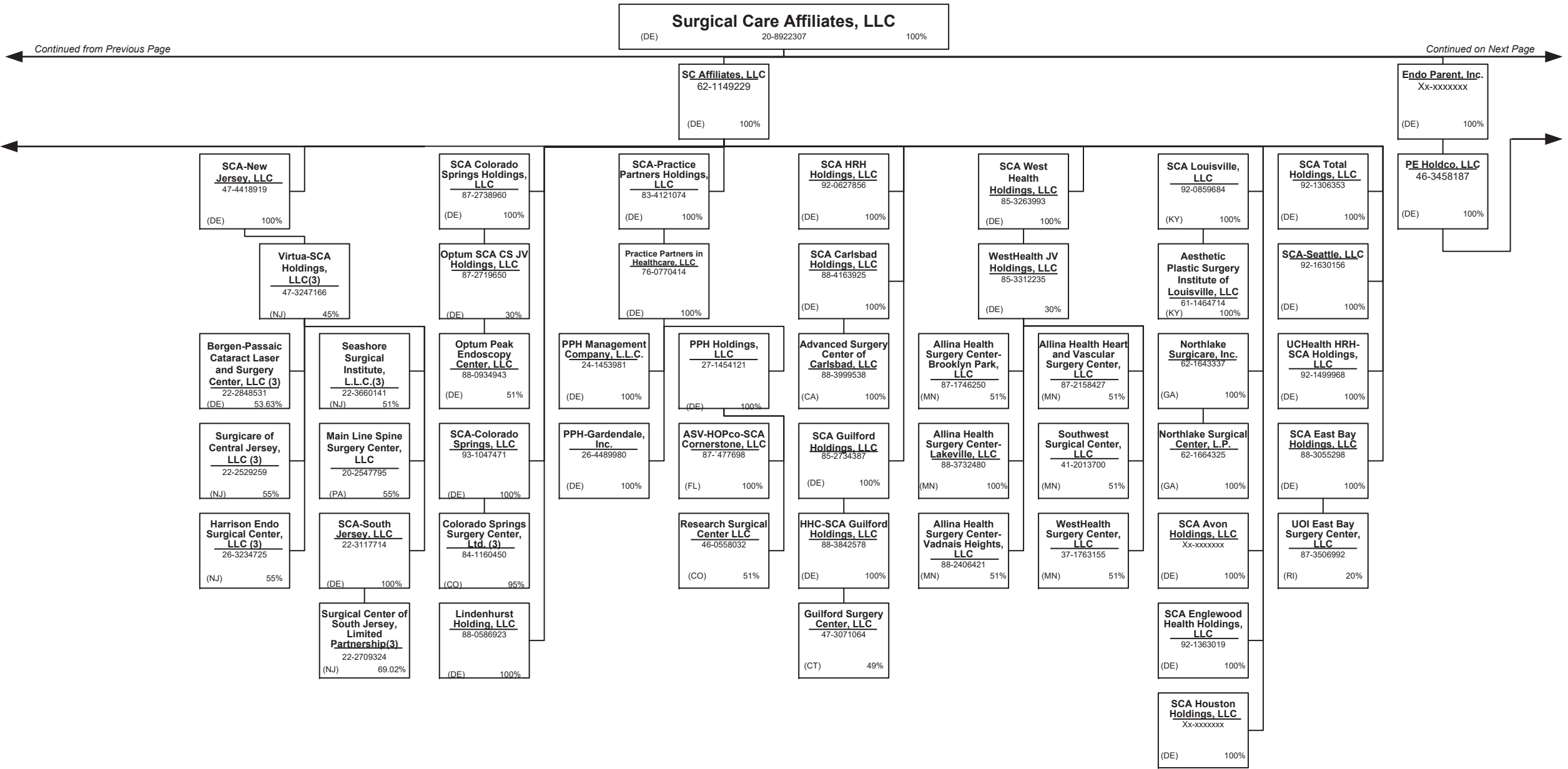
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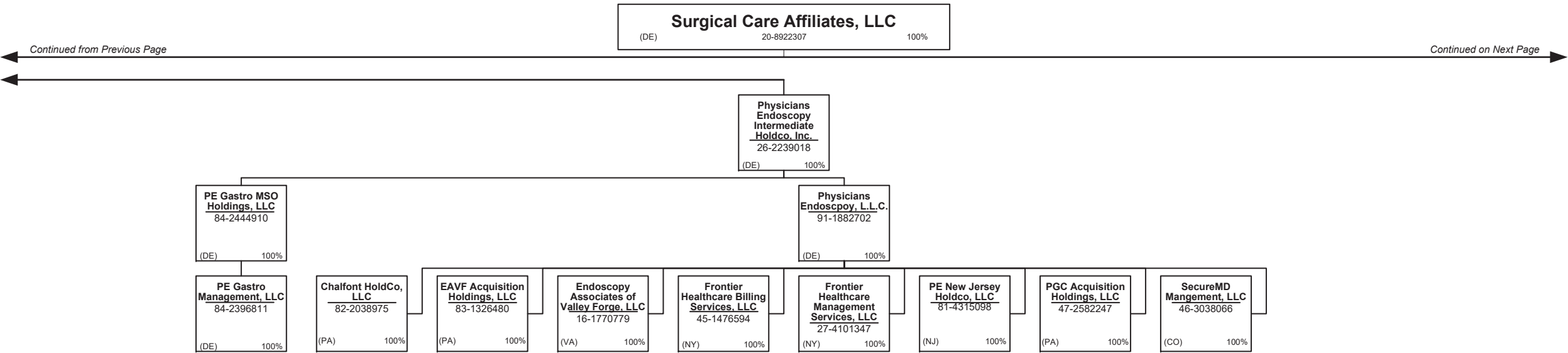
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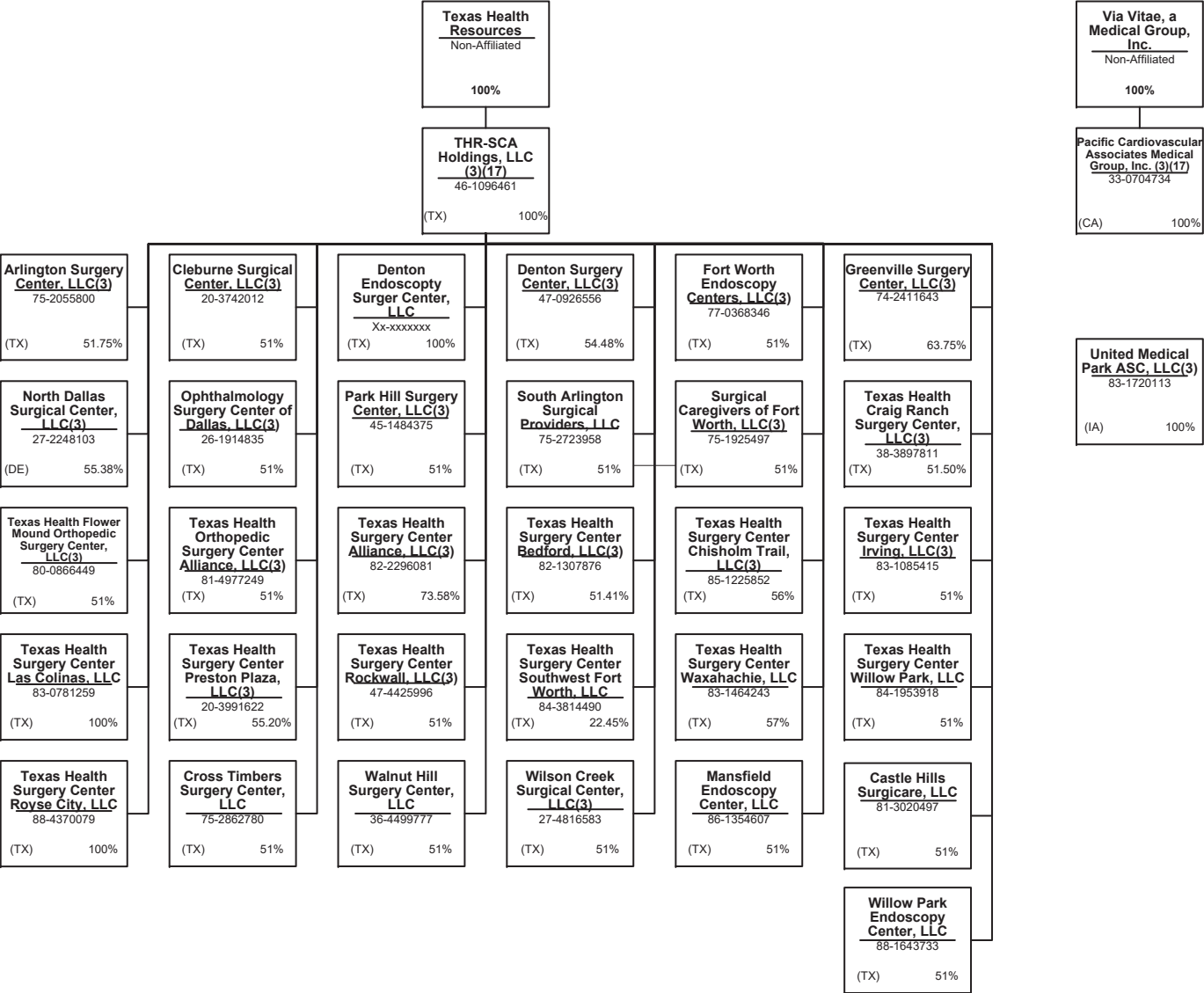
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Surgical Care Affiliates, LLC

(DE)20-8922307100%

Continued from Previous Page

Substantively Controlled Surgical Care Affiliate Entities



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE UnitedHealthcare Community Plan, Inc.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

Professionally Owned Entities

Entity Name	Juris.	Federal Tax ID	Entity Name	Juris.	Federal Tax ID
4C Medical Group, PLC	AZ	45-2402948	Carbondale Counseling Associates LLC	IL	47-1130641
A.G. Dikengil, Inc.	NJ	22-3149900	CareMount Health Solutions ACO, LLC	NY	n/a
AbleTo Behavioral Health Services of Michigan, P.C.	MI	85-4328419	Carolina Behavioral Care, P.A.	NC	56-1780933
AbleTo Behavioral Health Services of New Jersey, P.C.	NJ	85-4306375	Carroll Counseling Center LLC	MD	52-2072546
AbleTo Behavioral Health Services, PC	CT	47-5519672	Centers for Family Medicine, GP	CA	33-0483510
AbleTo Licensed Clinical Social Worker Services, P.C.	CA	85-0739865	Christopher Stalberg, M.D., PLLC	AZ	n/a
AbleTo Psychiatry Health Services, P.C.	MA	88-2290313	Cielo House, Inc.	CA	87-2440218
AHN Accountable Care Organization, LLC	IN	45-4171713	Cognitive-Behavioral Therapy Center of Western North Carolina, P.A.	NC	20-3056794
Aleph Psychological Services Inc.	CA	46-3477124	Colonial Family Practice, L.L.C.	SC	--
American Health Network of Indiana, LLC	IN	35-2108729	Columbia Counseling Center P.A.	MD	52-2052733
Angie Coil FNP, PLLC	AZ	81-2112951	Connect Medical, P.C.	NY	32-0551188
AppleCare Hospitalists Medical Group, Inc.	CA	14-1890491	David C. Anderholm, M.D., P.A.	MN	41-1879063
AppleCare Medical ACO, LLC	CA	45-2852872	David Moen, M.D. P.C.	NY	81-5101448
AppleCare Medical Group St. Francis, Inc.	CA	33-0845269	David R. Ferrell, M.D., P.C.	NV	45-2380022
AppleCare Medical Group, Inc.	CA	33-0898174	Day-OP Center Of Long Island Inc.	NY	11-2811353
ArchWell Health Professional Services Holding Co.	DE	86-3278602	DBT and EMDR Specialists, P.A.	MN	47-3322541
ArchWell Health Professional Services of Alabama, LLC	AL	86-3152173	Doc Martins, PLLC	AZ	20-0419099
ArchWell Health Professional Services of Arizona, LLC	AZ	87-2986923	Durable Medical Equipment, Inc.	MA	04-3106404
ArchWell Health Professional Services of Florida, P.A.	FL	88-3481216	Elite Focus Clinic, Inc., a Professional Corporation	CA	47-3861802
ArchWell Health Professional Services of Kansas, P.A.	KS	86-3241870	Empire Physicians' Medical Group, Inc.	CA	33-0181426
ArchWell Health Professional Services of Nebraska, LLC	NE	87-3065955	Eugene Center of Anxiety and Stress, LLC	OR	83-2740282
ArchWell Health Professional Services of Nevada, P.C.	NV	88-1285211	Eugene Therapy, LLC	OR	90-0624377
ArchWell Health Professional Services of North Carolina, P.C.	NC	86-3222071	Everett Physicians, Inc. P.S.	WA	81-1625636
ArchWell Health Professional Services of Oklahoma, LLC	OK	86-3190019	Evolve, LLC	WI	61-1752488
ARTA Western California, Inc.	CA	33-0658815	Family Counseling Associates of Salem Andover LLC	NH	27-0820363
Aspectus, Inc.	MA	04-3403101	Ferrell Physician Services, P.C.	NY	87-4007730
Astra Medical Clinic, PLLC	AZ	86-0882561	First Hill Surgery Center, LLC	WA	47-2066485
Atrius Health, Inc.	MA	n/a	First Step Services, LLC	NC	51-0484581
Beaver Medical Group, P.C.	CA	33-0645967	Flagstaff Family Physicians, PLLC	AZ	86-0959327
Behavioral Solutions, P.C.	MA	04-3316367	Good Samaritan Medical Practice Association, Inc., A Medical Group	CA	95-3969271
Better Health Value Network, LLC	WA	47-4349079	Greater Phoenix Collaborative Care, P.C.	AZ	27-2337725
Bexar Imaging Center, LLC	TX	22-3858211	HealthCare Partners Affiliates Medical Group	CA	95-4526112
California Spring Holdings, PC	CA	81-0881243	HealthCare Partners ASC-HB, LLC	CA	26-4247365

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE UnitedHealthcare Community Plan, Inc.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

Professionally Owned Entities

Entity Name	Juris.	Federal Tax ID	Entity Name	Juris.	Federal Tax ID
HealthCare Partners Associates Medical Group, P.C.	CA	45-5273760	Landmark Medical of Pennsylvania, PC	PA	81-1605378
HealthCare Partners Medical Group, P.C.	CA	95-4340584	Landmark Medical of Rhode Island, PC	RI	84-2830065
Heron Ridge Assoc., P.L.C.	MI	80-0020865	Landmark Medical of Tennessee, PC	TN	30-1288593
Homecare Dimensions of Florida, Inc.	TX	81-0884465	Landmark Medical of Texas, PA	TX	83-2296389
Homecare Dimensions, Inc.	TX	74-2758644	Landmark Medical of Utah, PC	UT	84-2660339
IN Style OPTICAL, LLC	MA	27-3296953	Landmark Medical of Virginia, P.C.	VA	85-0839774
Inland Faculty Medical Group, Inc.	CA	33-0618077	Landmark Medical of Washington, PC	WA	47-3028655
Inspiris Medical Services of New Jersey, P.C.	NJ	45-2563134	Landmark Medical, P.C.	NY	47-1588943
INSPIRIS of Michigan Medical Services, P.C.	MI	27-1561674	Level2 Medical Services, P.A.	DE	84-5003916
INSPIRIS of New York Medical Services, P.C.	NY	13-4168739	Level2 Medical Services, P.A. New Jersey	NJ	87-2684015
INSPIRIS of Pennsylvania Medical Services, P.C.	PA	26-2895670	Level2 Medical Services, P.C. Alaska	AK	87-2600511
Jonathan E. Goldberg, Ph.D., Inc.	MA	26-3013277	Level2 Medical Services, P.C. California	CA	92-1153396
Joyce Marter & Associates, P.C.	IL	26-3478896	Level2 Medical Services, P.C. Utah	UT	87-0989804
K.P. Counseling, Ltd.	IL	30-0089259	Life Strategies Counseling, Inc.	AR	20-0468524
Kelsey-Seybold Medical Group, PLLC	TX	76-0386391	LifeSolutions Counseling Associates, P.C.	IN	26-3292877
KS Pharm, LLC	TX	84-2355006	March Vision Care Group, Incorporated	CA	95-4874334
KS SC, LLC	TX	84-2241460	March Vision Care IPA, Inc.	NY	27-3115058
Landmark Medical of Arkansas, P.A.	AR	85-0997438	March Vision Care of Texas, Inc.	TX	45-4227915
Landmark Medical of California, PC	CA	47-4553619	MAT-RX DEVELOPMENT, L.L.C.	TX	43-1967820
Landmark Medical of Connecticut, PC	CT	83-2295301	Mat-Rx Fort Worth GP, L.L.C.	TX	35-2262695
Landmark Medical of Florida, P.A.	FL	85-0838149	ME Urgent Care Nebraska, Inc.	NE	81-0936574
Landmark Medical of Idaho, PC	ID	92-0496439	MedExpress Employed Services, Inc.	DE	81-1265129
Landmark Medical of Kansas, P.A.	KS	82-4633545	MedExpress Primary Care Arizona, P.C.	AZ	81-4550969
Landmark Medical of Kentucky, PSC	KY	82-4881602	MedExpress Primary Care Arkansas, P.A.	AR	84-4234388
Landmark Medical of Louisiana, a Professional Corporation	LA	82-4881732	MedExpress Primary Care Kansas, P.A.	KS	81-4605885
Landmark Medical of Massachusetts, PLLC	MA	81-5364097	MedExpress Primary Care Maryland, P.C.	MD	82-3384324
Landmark Medical of Michigan, P.C.	MI	86-3599871	MedExpress Primary Care Massachusetts, P.C.	MA	82-1096099
Landmark Medical of Mississippi, P.C.	MS	82-5084178	MedExpress Primary Care Minnesota P.C.	MN	81-4396738
Landmark Medical of Missouri, P.C.	MO	82-4857713	MedExpress Primary Care Oklahoma, P.C.	OK	83-1077265
Landmark Medical of New Hampshire, P.C.	NH	85-1174070	MedExpress Primary Care South Carolina, P.C.	SC	83-0764858
Landmark Medical of North Carolina, P.C.	NC	82-4256752	MedExpress Primary Care Texas, P.A.	TX	84-2500750
Landmark Medical of Ohio, Professional Corporation	OH	82-4864947	MedExpress Primary Care Virginia, P.C.	VA	82-3395792
Landmark Medical of Oregon, PC	OR	47-2926188	MedExpress Primary Care West Virginia, Inc.	WV	82-4401181

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PART 1 – ORGANIZATIONAL CHART

Professionally Owned Entities

Entity Name	Juris.	Federal Tax ID	Entity Name	Juris.	Federal Tax ID
MedExpress Primary Care Wisconsin, S.C.	WI	81-4563448	Mental Health Resources, PLLC	TN	62-1396317
MedExpress Urgent Care – New Jersey, P.C.	NJ	45-5388778	MH Physician Three Holdco, a Medical Corporation	CA	27-4691544
MedExpress Urgent Care - Northern New Jersey PC	NJ	83-2089623	MHCH, Inc.	CA	80-0507474
MedExpress Urgent Care Arizona, P.C.	AZ	81-4030280	MHIPA Physician Two Holdco, a Medical Corporation	CA	27-4691508
MedExpress Urgent Care Arkansas, P.A.	AR	46-4348120	Mindscales Counseling, LLC	CT	47-2117693
MedExpress Urgent Care California, P.C.	CA	82-0930142	Mobile Medical Services of New Jersey, PC	NJ	81-2977678
MedExpress Urgent Care Connecticut, P.C.	CT	81-1956812	Mobile Medical Services, P.C.	NY	30-0445773
MedExpress Urgent Care Idaho, P.C.	ID	82-1135336	Moen, M.D., P.C.	CA	85-3287029
MedExpress Urgent Care Illinois, P.C.	IL	47-4308614	Monarch Health Plan, Inc.	CA	22-3935634
MedExpress Urgent Care Iowa, P.C.	IA	81-5353472	Monarch HealthCare, A Medical Group, Inc.	CA	33-0587660
MedExpress Urgent Care Kansas, P.A.	KS	47-1919283	Monika Roots, M.D., P.C.	CA	84-4887072
MedExpress Urgent Care Minnesota P.C.	MN	81-1125396	NAMM Medical Group Holdings, Inc.	CA	56-2627070
MedExpress Urgent Care Missouri P.C.	MO	47-3132625	naviHealth Michigan HBPC, P.C.	MI	84-3469040
MedExpress Urgent Care North Carolina, P.C.	NC	81-5138747	NC Center For Resiliency, PLLC	NC	47-2693055
MedExpress Urgent Care Oregon, P.C.	OR	82-1919436	New Perspectives Center for Counseling & Therapy, L.L.C.	OR	93-1173779
MedExpress Urgent Care Rhode Island, P.C.	RI	81-5362765	New York Licensed Clinical Social Work, P.C.	NY	86-3891057
MedExpress Urgent Care South Carolina, P.C.	SC	81-5380706	Northlight Counseling Associates, Inc.	AZ	86-0646417
MedExpress Urgent Care Texas, P.A.	TX	47-5147441	Northwest Medical Group Alliance, LLC	WA	91-1699944
MedExpress Urgent Care Washington, P.C.	WA	82-2443118	NPN IPA Washington, PLLC	WA	61-1855159
MedExpress Urgent Care Wisconsin, S.C.	WI	81-4281678	Oakland Psychological Clinic, P.C.	MI	38-2481929
MedExpress Urgent Care, Inc. – West Virginia	WV	26-4546400	OHR Physician Group, P.C.	OR	93-0979031
MedExpress Urgent Care, P.C. – Georgia	GA	47-1804667	Optum Clinic, P.A.	TX	75-2778455
MedExpress Urgent Care, P.C. – Indiana	IN	90-0929572	Optum Medical Care of New Jersey, P.C.	NJ	22-3624559
MedExpress Urgent Care, P.C. – Maryland	MD	45-3461101	Optum Medical Care, P.C.	NY	13-3544120
MedExpress Urgent Care, P.C. – Massachusetts	MA	47-1857908	Optum Medical Services of California, P.C.	CA	30-0826311
MedExpress Urgent Care, P.C. – Michigan	MI	46-4793937	Optum Medical Services of Colorado, P.C.	CO	45-5424191
MedExpress Urgent Care, P.C. – Oklahoma	OK	47-1824365	Optum Medical Services, P.C.	NC	45-3866363
MedExpress Urgent Care, P.C. – Pennsylvania	PA	26-3750502	OptumCare Portland, LLC	OR	93-1306308
MedExpress Urgent Care, P.C. – Tennessee	TN	45-4973138	Oregon Healthcare Resources, LLC	OR	27-3674492
MedExpress Urgent Care, P.C. – Virginia	VA	45-3123110	PE Healthcare Associates, LLC	NY	27-4496894
MedExpress Urgent Care, P.S.C. - Kentucky	KY	83-1565124	Peninsula Psychological Center, Inc., P.S.	WA	91-1885912
MedExpress, Inc. – Delaware	DE	45-5436856	Perspectives of Troy, P.C.	MI	38-2592367
Memorial Healthcare IPA, GP	CA	95-4688463	Physician Partners Medical Group, Inc.	CA	30-0516435

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PART 1 – ORGANIZATIONAL CHART

Professionally Owned Entities

Entity Name	Juris.	Federal Tax ID	Entity Name	Juris.	Federal Tax ID
Physician United PLLC	AZ	84-3476733	Refresh In-Home Counseling LLC	IL	82-5351068
Physicians Care Network, L.L.C.	WA	91-1822767	Refresh Pennsylvania, LLC	PA	84-1756547
Physicians Medical Group of San Jose, Inc.	CA	94-2722082	Reliant Medical Group The Endoscopy Center, LLC	MA	20-5251393
Physicians Medical Health Plan	CA	84-3715606	Reliant Medical Group, Inc.	MA	04-2472266
Physicians Medical Holdings	CA	86-2631012	Riverside Community Healthplan Medical Group, Inc.	CA	33-0055097
Pilot Holdings, P.C.	CA	87-3931756	Riverside Electronic Healthcare Resources, Inc.	CA	20-3420379
Pinnacle Medical Group, Inc.	CA	33-0795271	Robert B. McBeath, M.D. II, P.C.	NV	86-0857176
Polyclinic Holdings, P.C.	WA	83-3042027	Robert B. McBeath, M.D. III, P.C.	NV	46-2662506
POLYCLINIC MANAGEMENT SERVICES COMPANY, LLC	WA	46-0508606	Robert B. McBeath, M.D., Professional Corporation	NV	88-0310956
Primary Care Associated Medical Group, Inc.	CA	33-0527335	Saad A. Shakir, M.D., Inc.	CA	77-0398259
ProHEALTH Accountable Care Medical Group, PLLC	NY	45-4469117	San Bernardino Medical Group, Inc.	CA	--
ProHEALTH Ambulatory Surgery Center, Inc.	NY	11-3447394	Sanvello Behavioral Health Services of New Jersey, P.C.	NJ	85-0666386
ProHEALTH Care Associates of New Jersey LLP	NJ	47-5656253	Sanvello Behavioral Health Services of North Carolina, P.C.	NC	85-1959641
ProHEALTH Care Associates, L.L.P.	NY	11-3355604	Sanvello Behavioral Health Services of Texas, P.A.	TX	84-3152209
ProHEALTH Medical NY, P.C.	NY	47-1388406	Sanvello Behavioral Health Services, P.A.	DE	84-1754732
ProHealth Physicians, P.C.	CT	06-1469068	Saris Counseling, LLC	WI	n/a
ProHEALTH Urgent Care Medicine of New Jersey LLP	NJ	47-5661535	Seattle Psychology, P.L.L.C.	WA	46-3238571
ProHEALTH Urgent Care Medicine, PLLC	NY	46-1883579	SecureMD Professionals - California, PC	CA	46-3057015
Prospero Health Partners Florida, Inc.	FL	85-0775386	Serenity Family and Psychological Counseling Center, P.C.	CA	45-3802527
Prospero Health Partners New York, P.C.	NY	82-2400620	Shark Holdings, P.C.	CA	87-3142148
Prospero Health Partners North Carolina, P.C.	NC	84-4569314	Sherman Counseling Management, S.C.	WI	47-5082677
Prospero Health Partners, P.C.	MN	84-3234753	Silicon Valley TMS of Monterey Bay, GP	CA	81-3200297
Prospero Medical Services New Jersey, P.C.	NJ	84-3844362	Southwest Internal Medicine Group, Robert Ruiz, M.D., PLLC	AZ	86-0516447
Prospero Medical Services, P.A.	FL	87-2406404	Spring Behavioral Health of New Jersey, LLC	NJ	82-3087236
Psychiatry Services of New York, P.C.	NY	85-0921665	Springfield Psychological, P.C.	PA	23-2833266
Psychiatry Specialists Inc.	IL	27-3409538	Surgical Eye Experts, LLC	MA	65-1321064
Psychological Healthcare, PLLC	NY	16-1484552	Surprise Health Center, PLLC	AZ	86-1047772
Red Oak Counseling, Ltd.	WI	20-0785644	Susan Albright P.L.C.	AZ	20-5176158
Redlands Family Practice Medical Group, Inc.	CA	56-2627067	Talbert Medical Group, P.C.	CA	93-1172065
Refresh Canopy Cove, Inc.	FL	82-3603285	The Everett Clinic, PLLC	WA	91-0214500
Refresh Centers, Inc.	IN	30-0358493	The Polyclinic, PLLC	WA	91-0369070
Refresh Connecticut LLC	CT	84-2663780	The Potter's House Family & Children Treatment Center, LLC	GA	20-8357849
Refresh Evolve, LLC	WI	83-4507157	The Tabor Therapy Group, Inc.	IL	46-5461304

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

Professionally Owned Entities

Entity Name	Juris.	Federal Tax ID	Entity Name	Juris.	Federal Tax ID
Triangle Counseling Agency, Inc.	NC	26-2552129			
USMD Diagnostic Services, LLC	TX	27-2803133			
USMD Hospital at Arlington, L.P.	TX	73-1662763			
USMD Hospital at Fort Worth, L.P.	TX	20-3571243			
USMD of Arlington GP, L.L.C.	TX	73-1662757			
Vitucci, LCSW, P.C.	IL	85-1453387			
Warner Family Practice, P.C.	AZ	86-0462952			
Waypoint Minnesota PC	MN	46-2854394			
WellMed Florida Medicare ACO, LLC	TX	84-2233329			
WellMed Florida Services, PLLC	TX	45-2158334			
WellMed Greater Texas Medicare ACO, LLC	TX	84-2178104			
WellMed Medical Group, P.A.	TX	74-2574229			
WellMed Network of Florida, Inc.	TX	35-2314192			
WellMed Networks - DFW, Inc.	TX	41-2250215			
WellMed Networks, Inc.	TX	74-2889447			
WellMed of Las Cruces, Inc.	TX	92-0183013			
WellMed Tampa/Orlando Medicare ACO, LLC	TX	84-2193803			
WellMed Texas Medicare ACO, LLC	TX	84-2219968			
XLHome Michigan, P.C.	MI	46-3537245			
XLHome Northeast, P.C.	NJ	45-5530241			
XLHome Oklahoma, Inc.	OK	46-2931689			
XLHome, P.C.	MD	27-3543997			

Organizational Chart Footnotes

- (1) Entity is owned in full or in part by a UnitedHealth Group Incorporated friendly physician.
- (2) Control of the Foundation is based on sole membership, not the ownership of voting securities.
- (3) The remaining percentage is owned either by a non-affiliated entity, outside investor(s), current/former company officer(s), or third party shareholder(s).
- (4) The minority percentage is owned by one or more affiliated UnitedHealth Group Incorporated subsidiaries. Voting rights do vary.
- (5) No information of the other shareholder(s) has been provided
- (6) General partnership interests are held by United HealthCare Services, Inc. (89.77%) and by UnitedHealthcare, Inc. (10.23%). United HealthCare Services, Inc. also holds 100% of the limited partnership interests. When combining general and limited partner interests, United HealthCare Services, Inc. owns 94.18% and UnitedHealthcare, Inc. owns 5.83%.
- (7) Branch offices in Iraq and Uganda.
- (8) H&W Indemnity (SPC), Ltd. is an exempted segregated portfolio company organized under the laws of the Cayman Islands and holds a Cayman insurance license.
- (9) Registered as a foreign shareholder in Brazil.
- (10) Open
- (11) Polar II Fundo de Investimento em Participações is a Brazilian private equity investment fund incorporated in the form of a closed-end condominium.
- (12) N/A
- (13) Entity has a representative office in Beijing, China.
- (14) Open
- (15) Registered branch in the United Kingdom.
- (16) Open
- (17) Entity is not directly owned by the parent. However, the parent does have a viable economic interest as well as control over the entity through contractual agreements.

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Underwriting and Investment Exhibit Part 3 Line 25

	Claim Adjustment Expenses		3	4	5
	1	2			
	Cost Containment Expenses	Other Claim Adjustment Expenses	General Administrative Expenses	Investment Expenses	Total
2504. Miscellaneous Losses	9,468	2,572	40,441	0	52,481
2505. Professional Fees/Consulting	553,129	150,237	951,170	0	1,654,536
2506. Sundry General Expenses	6,480,228	1,153,939	7,401,180	0	15,035,347
2597. Summary of remaining write-ins for Line 25 from overflow page	7,042,825	1,306,748	8,392,791	0	16,742,364